

FEDERAL BUREAU OF INVESTIGATION  
FOI/PA  
DELETED PAGE INFORMATION SHEET  
FOI/PA# 1218644-0

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## 2. Funding for UAS

A. [REDACTED]

b7E

(U) Response:

[REDACTED]

B. [REDACTED]

(U) ~~(S//NF)~~ Response:

[REDACTED]

Owning Division  
OTD

Program

Video Surveillance Program (VSU)  
Video Surveillance Program/DTP  
(VSU)

Grand Total

\*The entire budget is not devoted to UAVs

[REDACTED]

b7E

Specific purchases are below (all purchases are ~~S//NF~~):

[REDACTED]

b7E

FY12

[REDACTED]

b7E

Classified By: J76J21T83  
Derived From: FBI NSISC-20090615  
Declassify On: 20381231

~~SECRET~~//NOFORN

CREW-2083

PS

PO INVOICE MATCHING INFORMATION

PMI

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 11/20/2007 09:37:15  
BROWSE: \_

=====

BUY ENTITY :  
PO NO. :  
PO LINE NO. :  
BLANKET REL. NO. :  
CURRENCY CODE :  
PAYMENT BASIS :

VENDOR:

BASE PERMIT TO PAY    INVOICED TO DATE    PERMIT TO PAY

PO HEADER :  
PO HEADER TAX/VAT :  
PO HEADER ADDL COST :  
BLANKET :  
BLANKET TAX/VAT :  
BLANKET ADDL COST :  
PO LINE :  
PO LINE TAX/VAT :  
PO LINE ADDL COST :

07,024

4A0

b7E

PS

VENDOR GENERAL INFORMATION

VGN

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_  
REQUEST: G \_\_\_\_\_

05/16/2007 09:28:24

PAY ENTITY :  
SHORT NAME :  
VENDOR NUMBER:

1:BUS TYPE - 2:WOMAN/SM.BUS

1: B

2: N

3: \_\_\_\_\_

4: \_\_\_\_\_

5: \_\_\_\_\_

DUNS NUMBER

D & B RATING DATE

D & B RATING

D & B APPRAISAL

SIC CODE

LABOR CONTRACT DATE

EST EXPENDITURE

TAX IDENTIFICATION #

CEC NUMBER

USER FIELD 2

EXPIRE DT: \_\_\_\_\_

4A0

04,011

b7E

b7E

PS

ORDER FROM VENDOR SETUP

VOS

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

05/16/2007 09:28:09

PAY ENTITY :  
VENDOR NUMBER :  
GROUP NUMBER :  
SHORT NAME :  
VENDOR TYPE :  
ORDER FROM NAME :  
STREET / PO :  
SUITE / APT :  
CITY :  
OPT ADDR 1 :  
OPT ADDR 2 :  
CONTACT :

--- EFT INFORMATION ---

ACCOUNT :  
BANK RTN :  
TAX ID NO:

FAX :  
PHONE :  
STATE CODE :  
POSTAL CODE :  
OPT ADDR USE :  
OPT STATE CD :  
OPT POSTAL CD:

PAYMENT TERMS :

STATUS:

ORDER HOLD:

--- CONSOLIDATED REPORTING INFORMATION ---

PAY ENTITY :  
VENDOR NUMBER :  
GROUP NUMBER :

4A0

06,018

b7E

PS

REQUISITION HEADER

RQH

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

04/20/2007 08:21:24

REQUEST: g \_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

RECEIVED

27 APR 23 11 3:16

QUANTICO  
COMBAT SUPPORT

BUY ENTITY :  
REQUISITION NO. :  
REQUESTER ID :  
REQUISITION TOTAL :  
REQUISITION LINE TOTAL :  
DIFFERENCE :  
BUYER ID :  
REQUISITION STATUS :  
GL EFFECTIVE DATE :  
DATE ENTERED :  
DATE LAST UPDATED :  
SIGNATURE APPROVAL :  
UNRESOLVED LINES : 0  
OPEN LINES : 9  
PARTIALLY CLOSED LINES : 0  
CLOSED LINES : 0  
TOTAL LINES : 9

NOTES: ENTERED 4/18/07 BY \_\_\_\_\_ TO ASPU/\_\_\_\_\_ ASAPU REC'D 4/19/07

AERIAL VEHICLES, \_\_\_\_\_ RCVD QCU 4/20

4A0

07,048

b6  
b7C  
b7E

b6  
b7C  
b7E

TRY  
Unit

REQ # b6  
b7C  
b7E

SRU ROUTING SLIP

<input checked="" type="checkbox"/> FY07	<input type="checkbox"/> FY06-7	<input type="checkbox"/> CNST	<input type="checkbox"/> NY	<input type="checkbox"/>
--	---------------------------------	-------------------------------	-----------------------------	--------------------------

*Funds Approval*

[Redacted Box]

4/18/07

- ☐ TRIAD
- ☐ PURCHASE CARD
- ☐ REIMBURSABLE

*Final Review*

☒ [Redacted Box]

*Commit/Copy/File*

☒ [Redacted Box]

4/18/07

*Send to:*

☐ [Redacted Box]  
☐ [Redacted Box]  
☐ [Redacted Box]  
☐ [Redacted Box]

☐ [Redacted Box] FBIHQ Rm 5270)

☐ [Redacted Box] (Investment Management Unit, 616 H. St. NW, Suite 703, Gallery Place) IT Acquisitions

☐ [Redacted Box] (Investment Management Unit, 616 H. St. NW, Suite 703, Gallery Place) IT Acquisitions

①

☒ Acquisition Strategy and Planning Unit (FBIHQ Rm 6863)

PLEASE SEND TO INDIVIDUAL MARKED BELOW WHEN FINISHED

②

☒

[Large Redacted Box]

- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐

b6  
b7C

Rev: 08/14/07

☒ Routine  
☐ Priority  
☐ Expedite

OPERATIONAL TECHNOLOGY DIVISION (OTD)  
Engineering Research Facility Quantico, VA

Requisition:

Entered:  yes

**REQUISITION (FD-369)  
COVER SHEET**

b6  
b7C  
b7E

- REQUIRED 1. ☒ **REQUIRED DOCUMENTATION**
- ☒ CARC Certification Form
  - ☐ Statement of Need (Required for Requisitions \$100,000 and Under)
  - ☒ EC (Required for Requisitions Over \$100,000)
  - ☐ Acquisition Plan FD-911 (Required for Requisitions Over \$5,000,000)
  - ☒ Market Research or Sole Source Justification
- Additional Requirements for IT Acquisitions Only
- ☐ COTS Approval (For IT Non-Baseline Acquisitions)
  - ☐ CIO Signed IT Acquisition Form (For Acquisitions Above \$25,000)
  - ☐ Mission Critical Need Statement

- REQUIRED 2. ☒ **UNIT CHIEF APPROVAL**
- \_\_\_\_\_  
 initial
3. ☒ **OVER \$100,000 - OTD SECTION CHIEF APPROVAL**
- \_\_\_\_\_  
 initial
4. ☒ **OVER \$250,000 - DEPUTY ASSISTANT DIRECTOR APPROVAL**
- \_\_\_\_\_  
 initial
5. ☐ **OVER \$1,000,000 - ASSISTANT DIRECTOR APPROVAL**
- \_\_\_\_\_  
 initial
6. ☐ **REQUISITION WITH ECs ATTACHED:**
- for uploading  
OR - alternate \_\_\_\_\_  
 initial  
initial
7. ☒ **TMSU - PROJECT MANAGEMENT OFFICE (PMO)**
- If the answer to either question is YES, requisition must be sent to PMO:
- Is this request part of a new PMO project? YES ☐ NO ☐  
Is this request a reportable PMO activity? YES ☐ NO ☐

b6  
b7C

- REQUIRED 8. ☒ **STRATEGIC RESOURCES UNIT (SRU) - FUNDING APPROVAL  
AND ROUTE TO CONTRACTING**
- DTP: All Accounts  
\_\_\_\_\_  
initial
- TFS&S: Services, Training  
\_\_\_\_\_  
initial
- TFS&S: Equipment, Supplies  
\_\_\_\_\_  
initial
- 4/18/07

b6  
b7C

CREW-2115



(Rev. 01-31-2003)

b6  
b7C

~~SECRET~~

## FEDERAL BUREAU OF INVESTIGATION

Precedence: ROUTINE

Date: 03/23/2007

To: Operational Technology

Attn: Strategic Resources  
Unit

From: Operational Technology

Technical Programs Section/Technical Response Unit

Contact: SSA [REDACTED] tel., [REDACTED]

Approved By: [REDACTED]

b6  
b7C

Drafted By: [REDACTED]

(U) Case ID #: ~~(S)~~ 319D1-HQ-A1487504-OTD (Pending)

(U) Title: ~~(S)~~ BUDGET MATTERS

(U) Synopsis: ~~(S)~~ To request purchase of [REDACTED]

b7E

(U) ~~(S)~~

~~Derived From : G-3~~  
~~Declassify On: X1~~

Enclosure(s): Quote from [REDACTED]

(U) Details: ~~(S)~~ [REDACTED]

b3  
b7E

~~SECRET~~

UPLOADED

APR 14 2007

3.00

CREW-2118

11/15/07 17.000

~~SECRET~~

To: Operational Technology From: Operational Technology  
(U) Re: ~~(S)~~ 319D1-HQ-A1487504-OTD, 03/23/2007

LEAD(s):

Set Lead 1: (Action)

OPERATIONAL TECHNOLOGY

STRATEGIC RESOURCES UNIT

(U) ~~(S)~~ Request that Strategic Resources Unit approves  
request for TRU to purchase [REDACTED]  
[REDACTED]

b7E

♦♦

~~SECRET~~

**Intelligence Community Acquisition Risk Center (CARC)  
Certification**Requisition No.: Unit: *TECHNICAL RESPONSE UNIT*Requisition Date: *3/23/07*

b7E

Effective October 1, 2005, the FBI's Security Division implemented the Intelligence Community Acquisition Risk Center (CARC) requirement within the FBI. Contracting Officers are responsible for ensuring CARC assessments are completed on all contracts for the procurement of classified services or critical assets. **However, Unit Chiefs are responsible for completing and signing the CARC Certification.**

1. Does this procurement require access to classified information (defined as work where the effort will require the contractor's and/or manufacturer's facilities to possess a facility security clearance and have access to or maintain any FBI data and/or information classified at the Confidential, Secret, or Top Secret levels?)



Yes



No

2. Is this a procurement of critical assets (i.e., ADP hardware/software/supplies, technical supplies/equipment, telecommunications/communications equipment, or audiovisual equipment) for use by FBI components?



Yes



No

If the answers to #1 and #2 are both "No", please continue to #8.

3. Which FBI entity will use this equipment, supply, or service?
- 

4. What is the highest classification or security requirement for this equipment, supply, or service?



Top Secret



Secret



Confidential



Unclassified

ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 11-13-2013 BY NSICG F54M93K42

11/09/2006

**Intelligence Community Acquisition Risk Center (CARC)  
Certification**

Requisition No.:

Unit: *TECHNICAL RESPONSE UNIT*

Requisition Date: *3/23/07*

b7E

Effective October 1, 2005, the FBI's Security Division implemented the Intelligence Community Acquisition Risk Center (CARC) requirement within the FBI. Contracting Officers are responsible for ensuring CARC assessments are completed on all contracts for the procurement of classified services or critical assets. **However, Unit Chiefs are responsible for completing and signing the CARC Certification.**

1. Does this procurement require access to classified information (defined as work where the effort will require the contractor's and/or manufacturer's facilities to possess a facility security clearance and have access to or maintain any FBI data and/or information classified at the Confidential, Secret, or Top Secret levels?



Yes



No

2. Is this a procurement of critical assets (i.e., ADP, hardware/software/supplies, technical supplies/equipment, telecommunications/communications equipment, or audiovisual equipment) for use by FBI components?



Yes



No

If the answers to #1 and #2 are both "No", please continue to #8.

3. Which FBI entity will use this equipment, supply, or service?
- 

4. What is the highest classification or security requirement for this equipment, supply, or service?



Top Secret



Secret



Confidential



Unclassified

Requisition No.

b7E

5. Explain how and where this equipment, supply, or service will be used.

*TRU TRAINING & REAL WORLD MISSIONS*

6. What risk mitigation/minimization measures currently exist or will be put in place in relation to this procurement?

*7*  
*1*

7. Have you purchased the same item(s) or service from this vendor recently?

Yes

☒

No

☐

Unknown

☐

If "Yes", provide the Requisition or Purchase Order Number(s)

---

Requisition No

b7E

8. If a CARC assessment results in the Security Division's Acquisition Security Unit making recommendations for risk mitigation/minimization, I agree to take steps to initiate any recommended measures or provide an explanation to ASU as to how existing risk mitigation/minimization measures provide adequate protection against any identified risks.

In addition, if the use of a critical asset changes after submittal of this certification, I agree to contact OTD's Security Management Office for further instructions on how to proceed.

[Redacted Signature]

Unit Chief Signature (or Acting if for more than 30 days)

b6  
b7C

[Redacted Name]

Name (Typed or Printed)

3-23-07

Date

POC's for additional information:

[Redacted Name] / [Redacted Telephone No.]

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[Redacted Name] / [Redacted Telephone No.]

12-201 (Rev. 9-6-2006)

**FBI**

U.S. Department of Justice  
Federal Bureau of Investigation



Purchase Order for Supplies or Services

1. Date of Order 03/16/2007		2. Order No.		3. Mod. No.		4. Mod. Date		5. Page No. 1	
6. To Contractor (Name, Address and Zip Code): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>				7. Ship to (Consignee and address, Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: <div style="border: 1px solid black; width: 100px; height: 15px;"></div> BUILDING 27958A QUANTICO, VA 22135					
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROPERTY PROCUREMENT & MGMT. ROOM 4823, JHM F.B.I. BLDG. WASHINGTON, D. C. 20535				9. Send Invoice to: (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION *****SEE BELOW*****					
10. Business Classification: OTHER SMALL BUSINESS			11. F.O.B. Point DESTINATION			12. Discount Terms NET 30 DAYS			
13. Schedule									
Line No. (A)	Supplies or Services (B)			Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)		
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and Conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.						15. Grand Total XXXXXXXXXXXX See Instructions on Reverse			
Point of Contact - Purchase Order Information:				16. United States of America By (Signature)					
Point of Contact - Invoice Payment Status: Commercial Payments Unit <div style="border: 1px solid black; width: 80px; height: 15px;"></div>				17. Name (Typed) XXXXXXXXXXXX Title: Contracting Officer					

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b7E

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C - PROCUREMENT  
CREW-2128



**U.S. Department of Justice  
Federal Bureau of Investigation**



**Purchase Order for Supplies or Services**

1. Date of Order <b>05/16/2007</b>		2. Order No. [Redacted]		3. Mod. No.		4. Mod. Date		5. Page No. <b>2</b>	
6. To Contractor (Name, Address and Zip Code): [Redacted]				7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 2775BA QUANTICO, VA. 22135</b>					
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION PROPERTY PROCUREMENT &amp; MGMT. ROOM 4025, JEN F.B.I. BLDG. WASHINGTON, D. C. 20535</b>				9. Send Invoice to (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION *****SEE BELOW*****</b>					
10. Business Classification <b>OTHER SMALL BUSINESS</b>			11. F.O.B. Point <b>DESTINATION</b>			12. Discount Terms <b>NET 30 DAYS</b>			
13. Schedule									
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)				
14. Type of Order  <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery, as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.						15. Grand Total <div style="border: 1px solid black; padding: 5px; display: inline-block;">XXXXXXXXXXXX</div> See Instructions on Reverse			
Point of Contact - Purchase Order Information:						16. United States of America By (Signature)			
Point of Contact - Invoice Payment Status: Commercial Payments Unit - [Redacted]						17. Name (Typed) <b>XXXXXXXXXXXX</b>  Title: Contracting Officer			

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b7E

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**C - PROCUREMENT  
CREW-2129**





U.S. Department of Justice  
Federal Bureau of Investigation



## Purchase Order for Supplies or Services

1. Date of Order 05/16/2007		2. Order No. [Redacted]		3. Mod. No.		4. Mod. Date		5. Page No. 2	
6. To Contractor (Name, Address and Zip Code): [Redacted]				7. Ship to (Consignee and address, Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27958A QUANTICO, VA 22135					
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROPERTY PROCUREMENT & MGMT. ROOM 3825, JEH F.B.I. BLDG. WASHINGTON, D. C. 20535				9. Send Invoice to: (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION *****SEE BELOW*****					
10. Business Classification OTHER SMALL BUSINESS				11. F.O.B. Point DESTINATION		12. Discount Terms NET 30 DAYS			
13. Schedule									
Line No. (A)	Supplies or Services (B)			Quantity Ordered (C)	Unit (D)	Unit Price (E)		Amount (F)	
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and Conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.						15. Grand Total XXXXXXXXXXXX See Instructions on Reverse			
Point of Contact - Purchase Order Information:				16. United States of America By (Signature)					
Point of Contact - Invoice Payment Status: Commercial Payments Unit [Redacted]				17. Name (Typed) XXXXXXXXXXXX Title: Contracting Officer					

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C - PROCUREMENT  
CREW-2130

**FBI**U.S. Department of Justice  
Federal Bureau of Investigation**Purchase Order for Supplies or Services**

1. Date of Order 05/16/2007		2. Order No. [Redacted]		3. Mod. No.		4. Mod. Date		5. Page No. 4	
6. To Contractor (Name, Address and Zip Code): [Redacted]				7. Ship to (Consignee and address, Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27958A QUANTICO, VA 22135					
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROPERTY PROCUREMENT & MGMT. ROOM 2823, JEH F.B.I. BLDG. WASHINGTON, D.C. 20535				9. Send Invoice to: (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION *****SEE BELOW*****					
10. Business Classification OTHER SMALL BUSINESS			11. F.O.B. Point DESTINATION			12. Discount Terms NET 30 DAYS			
13. Schedule									
Line No. (A)	Supplies or Services (B)			Quantity Ordered (C)	Unit (D)	Unit Price (E)		Amount (F)	
	[Redacted]								
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and Conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. CONTRACTOR NUMBER [Redacted] <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.									
15. Grand Total [Redacted]						See Instructions on Reverse			
Point of Contact - Purchase Order Information: [Redacted]				16. United States of America By (Signature) [Redacted]					
				17. Name (Typed) [Redacted] Title: Contr [Redacted]					

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b7EC - PROCUREMENT  
CREW-2131

PS

PO INVOICE MATCHING INFORMATION

PMI

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 09/26/2008 15:38:19  
BROWSE: \_

=====

BUY ENTITY  
PO NO.  
PO LINE NO.  
BLANKET REL. NO.  
CURRENCY CODE  
PAYMENT BASIS

:  
:  
:  
:  
:  
:

VENDOR:

b7E

BASE PERMIT TO PAY    INVOICED TO DATE    PERMIT TO PAY

PO HEADER  
PO HEADER TAX/VAT  
PO HEADER ADDL COST  
BLANKET  
BLANKET TAX/VAT  
BLANKET ADDL COST  
PO LINE  
PO LINE TAX/VAT  
PO LINE ADDL COST

:  
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12-201 (Rev. 9-6-2006)

**FBI**

U.S. Department of Justice  
Federal Bureau of Investigation



**Purchase Order for Supplies or Services**

1. Date of Order		2. Order No.		3. Mod. No.		4. Mod. Date		5. Page No.	
6. To Contractor (Name, Address and Zip Code):					7. Ship to (Consignee and address, Zip Code):				
8. Issuing Office (Address correspondence to):					9. Send Invoice to: (Name, Address and Zip Code):				
10. Business Classification			11. F.O.B. Point			12. Discount Terms			
13. Schedule									
Line No. (A)	Supplies or Services (B)				Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)	
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and Conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.							15. Grand Total		
Point of Contact - Purchase Order Information:  Point of Contact - Invoice Payment Status: Commercial Payments Unit - <span style="border: 1px solid black; display: inline-block; width: 80px; height: 15px; vertical-align: middle;"></span>							16. United States of America By (Signature)		
							17. Name (Typed)  Title: Contracting Officer		

See Instructions on Reverse

C - PROCUPEMENT

CREW-2138

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PS

REQUISITION HEADER

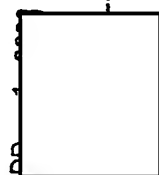
RQH

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

04/01/2008 10:56:41

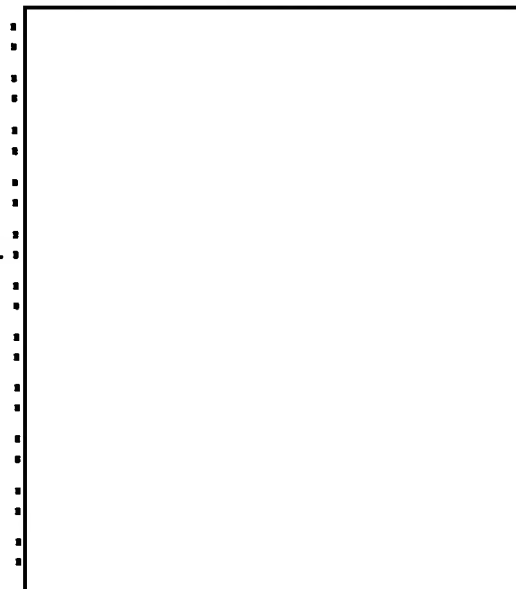
REQUEST: g\_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

RECEIVED



BY:

BUY ENTITY  
REQUISITION NO.  
REQUESTER ID  
REQUISITION TOTAL  
REQUISITION LINE TOTAL  
DIFFERENCE  
BUYER ID  
REQUISITION STATUS  
GL EFFECTIVE DATE  
DATE ENTERED  
DATE LAST UPDATED  
SIGNATURE APPROVAL  
UNRESOLVED LINES  
OPEN LINES  
PARTIALLY CLOSED LINES  
CLOSED LINES  
TOTAL LINES



0  
2  
0  
0  
2

NOTES: ENTERED 3/20/08 BY [REDACTED] TO ASPU.; ASAPU REC'D 3/25/08; FORWARDED  
TO QCU 3/28/08 [REDACTED] RCVD QCU 4/1

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PS

REQUISITION HEADER

RQH

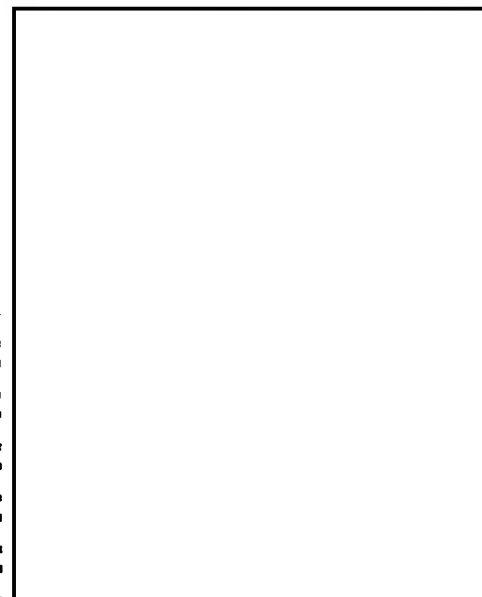
NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

03/27/2008 11:30:36

REQUEST: G\_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

=====

BUY ENTITY	:	
REQUISITION NO.	:	
REQUESTER ID	:	
REQUISITION TOTAL	:	
REQUISITION LINE TOTAL	:	
DIFFERENCE	:	
BUYER ID	:	
REQUISITION STATUS	:	
GL EFFECTIVE DATE	:	
DATE ENTERED	:	
DATE LAST UPDATED	:	
SIGNATURE APPROVAL	:	
UNRESOLVED LINES	:	0
OPEN LINES	:	2
PARTIALLY CLOSED LINES	:	0
CLOSED LINES	:	0
TOTAL LINES	:	2



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NOTES: ENTERED 3/20/08 BY  TO ASPU.; ASAPU REC'D 3/25/08; FORWARDED  
TO QCU 3/28/08

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08

ALTERNATE COMP / ACCT / CNTR

0.00

LAST ACTIVITY: 03/27/2008

NA  
NA  
NA

(FUND BALANCE)

(AVAIL BAL)

11

(AVAIL BAL)

L	OVEREXPEND				A	E		C G					
V	TOLERANCE				BDG YTD P	EST	N	L R		ACTIVE		INACTIVE	
L	POST	AMT	PCT	GRP LTD P	REV EXP	C	COMM	S P	STAT	DATE		DATE	
1	N	0	0	L Y	N N	N	N			/ /		/ /	

07,002

# Acquisition Security Unit Checklist

(Not applicable to Unclassified Conferences, Facilities, Machinery, and Constructions Services)

COMPLETED BY REQUESTOR	
Request Date:	
Anticipated Procurement Date:	
Project Title:	
Requisition #:	
Previous PO/Contract #:	
Point Of Contact:	
POC Phone #:	
Division Security Officer:	
Div Security Officer Phone #:	

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DOCUMENTATION ATTACHED
<input type="checkbox"/> FD-369 Requisition for Supplies and/or Equipment
<input type="checkbox"/> Statement of Work/Statement of Objectives/ Requirements Document
<input type="checkbox"/> Acquisition Security Request Form
<input type="checkbox"/> Written Priority J&A

HIGHEST CLASSIFICATION REQUIRED TO PROVIDE SERVICES/PRODUCTS
<input type="checkbox"/> UNCLASSIFIED <input type="checkbox"/> SECRET <input type="checkbox"/> TOP SECRET <input type="checkbox"/> TOP SECRET/SCI

ASU USE ONLY	
Date Received: 3/26/08	ASU P [Redacted] Phone: [Redacted]

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<input type="checkbox"/> DD 254 Required
<input type="checkbox"/> CARC Required
<input type="checkbox"/> Warrantless Search Special Security Requirement-(Located on ASU intranet site)
<input type="checkbox"/> eQIP Special Security Requirement-(Located on ASU intranet site)
<input type="checkbox"/> CARC Special Security Requirement-(Located on ASU intranet site)

SPECIAL NOTES

PRIORITY

All requests will be handled by date received by ASU unless specific issues affecting the priority, i.e. Director's Priority, are specifically provided in writing by the requestor.

ACKNOWLEDGEMENT

Requestor	Date	Division's Security Officer	Date
	[Redacted]	[Redacted]	3/26/08
	ASU		Date

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Return to Acquisition Security Unit, PA-555  
Unclassified Fax: 202-220-9232



TRY  
Unit

☒ ROUTINE      ☐ PRIORITY      ☐ EXPEDITE

SRU ROUTING SLIP

<input checked="" type="checkbox"/> FY08	<input type="checkbox"/> FY07-8	<input type="checkbox"/> CNST	<input type="checkbox"/> NY	<input type="checkbox"/>
--	---------------------------------	-------------------------------	-----------------------------	--------------------------

*Funds Approval*

[Redacted Box]

3/19/08

- ☐ TRIAD
- ☐ PURCHASE CARD
- ☐ REIMBURSABLE

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b7C

*Final Review*

☒ [Redacted Box]

[Redacted Box]

*Commit/Copy/File*

☒ [Redacted Box]

[Redacted Box]

3/20/08

*Send to:*

- ☐ [Redacted Box] (SRU)
- ☐ [Redacted Box] (AMU)
- ☐ [Redacted Box] (ATDU)
- ☐ [Redacted Box] (AMU)

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- ☐ [Redacted Box] FBIHQ Rm 5270)

- ☐ [Redacted Box] Investment Management Unit, 616 H. St. NW, Suite 703, Gallery Place) IT Acquisitions
- ☐ [Redacted Box] (Investment Management Unit, 616 H. St. NW, Suite 703, Gallery Place) IT Acquisitions

☒ Acquisition Strategy and Planning Unit (FBIHQ Rm- 6863)

**PLEASE SEND TO INDIVIDUAL MARKED BELOW WHEN FINISHED**

☒ [Large Redacted Box]

☐

☐

☐

☐

☐

☐

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Rev 01-18-08

☒ Routine  
☐ Priority  
☐ Expedite

OPERATIONAL TECHNOLOGY DIVISION (OTD)  
Engineering Research Facility, Orlando, VA

REQUISITION (FD-369)  
COVER SHEET

REQUISITION [ ]

Approved in PALS ☒ yes

b7E

REQUIRED 1. ☒ **REQUIRED DOCUMENTATION**

☒ CARC Certification Form  
☒ Statement of Need (Required for Requisitions \$100,000 and Under)  
☐ EC (Required for Requisitions Over \$100,000)  
☐ Acquisition Plan FD-911 (Required for Requisitions Over \$5,000,000)  
☒ Market Research or Sole Source Justification

Additional Requirements for IT Acquisitions Only

☐ COTS Approval (For IT Non-Baseline Acquisitions)  
☐ CIO Signed IT Acquisition Form (For Acquisitions Above \$25,000)  
☐ Mission Critical Need Statement

REQUIRED 2. ☒ **UNIT CHIEF APPROVAL**

AUC [ ] initial

3. ☐ **TMSU - Contract Review (CAO) / Project Review (PMO)** initial

If the answer to either question is YES, requisition must be sent to TMSU:  
Is this request funding a Project? Yes ☐ No ☒  
Is this request funding a Service Contract? Yes ☐ No ☒

4. ☐ **OVER \$100,000 - OTD SECTION CHIEF APPROVAL**

[ ] initial

5. ☐ **OVER \$250,000 - DEPUTY ASSISTANT DIRECTOR APPROVAL**

[ ] initial

6. ☐ **OVER \$1,000,000 - ASSISTANT DIRECTOR APPROVAL**

[ ] initial

7. ☐ **REQUISITION WITH ECs ATTACHED:**

[ ] for uploading initial  
OR - alternate [ ] initial

REQUIRED 8. ☒ **STRATEGIC RESOURCES UNIT (SRU) - FUNDING APPROVAL AND ROUTE TO CONTRACTING**

DTP: All Accounts [ ] initial

TFS&S: Services, Training [ ] initial

TFS&S: Equipment, Supplies [ ] initial

3/19/08

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4/25/2007

**Intelligence Community Acquisition Risk Center (CARC) Certification**

Requisition No.:

Unit: Technical Response Unit

Requisition Date: 3-17-08

Effective October 1, 2005, the FBI's Security Division implemented the Intelligence Community Acquisition Risk Center (CARC) requirement within the FBI. Contracting Officers are responsible for ensuring CARC assessments are completed on all contracts for the procurement of classified services or critical assets. **However, Unit Chiefs are responsible for completing and signing the CARC Certification.**

1. Does this procurement require access to classified information (defined as work where the effort will require the contractor's and/or manufacturer's facilities to possess a facility security clearance and have access to or maintain any FBI data and/or information classified at the Confidential, Secret, or Top Secret levels?)



Yes



No

2. Is this a procurement of critical assets (i.e., ADP hardware/software/supplies, technical supplies/equipment, telecommunications/communications equipment, or audiovisual equipment) for use by FBI components?



Yes



No

If the answers to #1 and #2 are both "No", please continue to #8.

3. Which FBI entity will use this equipment, supply, or service?

\_\_\_\_\_

4. What is the highest classification or security requirement for this equipment, supply, or service?



Top Secret

Secret



Confidential



Unclassified



5. Explain how and where this equipment, supply, or service will be used.  
TRU training + Real world missions.

6. What risk mitigation/minimization measures currently exist or will be put in place in relation to this procurement?  
n.a.

7. Have you purchased the same item(s) or service from this vendor recently?

Yes



No



Unknown



If "Yes", provide the Requisition or Purchase Order Number(s)

\_\_\_\_\_  \_\_\_\_\_

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CREW-2157

8. If a CARC assessment results in the Security Division's Acquisition Security Unit making recommendations for risk mitigation/minimization, I agree to take steps to initiate any recommended measures or provide an explanation to ASU as to how existing risk mitigation/minimization measures provide adequate protection against any identified risks.

In addition, if the use of a critical asset changes after submittal of this certification, I agree to contact OTD's Security Management Office for further instructions on how to proceed.

\_\_\_\_\_  
Unit Chief Signature (or Acting if for more than 30 days)

\_\_\_\_\_  
Name (Typed or Printed)

\_\_\_\_\_  
Date

3/17/08

POC's for additional information:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Telephone No.

9. This procurement is an urgent/emergency procurement and a waiver to the normal CARC process is requested. The acquisition of this equipment, supply, or service is mission critical, time sensitive, and must be acquired prior to the normal two week waiting period for CARC assessments.

\_\_\_\_\_  
Unit Chief Signature (or Acting if for more than 30 days)

\_\_\_\_\_  
Name (Typed or Printed)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Assistant Director Signature

\_\_\_\_\_  
Name (Typed or Printed)

\_\_\_\_\_  
Date

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b6  
b7C

12-201 (Rev. 9-6-2006)



U.S. Department of Justice  
Federal Bureau of Investigation



Purchase Order for Supplies or Services

1. Date of Order 04/14/2009		2. Order No.		3. Mod. No.		4. Mod. Date		5. Page No. 1	
6. To Contractor (Name, Address and Zip Code):  				7. Ship to (Consignee and address, Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 2775BA QUANTICO, VA 22135					
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6028, JEH F.B.I. BLDG. WASHINGTON, D. C. 20535				9. Send Invoice to: (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 2775BA QUANTICO, VA 22135					
10. Business Classification				11. F.O.B. Point 34* - FREE-PORT		12. Discount Terms NET 30 DAYS			
13. Schedule									
Line No. (A)	Supplies or Services (B)			Quantity Ordered (C)	Unit (D)	Unit Price (E)		Amount (F)	
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and Conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.						15. Grand Total XXXXXXXXXX See Instructions on Reverse			
Point of Contact - Purchase Order Information:					16. United States of America By (Signature)				
Point of Contact - Invoice Payment Status: Commercial Payments Unit [REDACTED]					17. Name (Typed) [REDACTED] Title: Contracting Officer				

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b7E

b6  
b7C

C - PROCUREMENT  
CREW-2160



**U.S. Department of Justice  
Federal Bureau of Investigation**



**Purchase Order for Supplies or Services**

1. Date of Order 01/14/2008		2. Order No.		3. Mod. No.		4. Mod. Date		5. Page No. 2	
6. To Contractor (Name, Address and Zip Code):					7. Ship to (Consignee and address, Zip Code):				
[Redacted]					FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27758A QUANTICO, VA 22135				
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6425, 9TH F.D.L. BLOC. WASHINGTON, D. C. 20035					9. Send Invoice to: (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27758A QUANTICO, VA 22135				
10. Business Classification				11. F.O.B. Point SHIP - PREPAID			12. Discount Terms NET 30 DAYS		
13. Schedule									
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)				
	THIS PURCHASE IS NEGOTIATED UNDER THE AUTHORITY OF: THE H. GEP 25500(1) [Redacted]								
14. Type of Order								15. Grand Total	
<input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and Conditions specified on both sides of this order, the above quotation, number if indicated, and the attached sheets, if any, including delivery as indicated. CONTRACTOR NUMBER [Redacted]								<input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
Point of Contact - Purchase Order Information: [Redacted]								16. United States of America By (Signature) [Redacted]	
17. Name (Typed) [Redacted]								Title: Contracting Officer [Redacted]	

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**C - PROCUREMENT  
CREW-2161**

TRY  
Unit

☒ ROUTINE      ☐ PRIORITY      ☐ EXPEDITE

SRU ROUTING SLIP

<input checked="" type="checkbox"/> FY09	<input type="checkbox"/> FY08-9	<input type="checkbox"/> CNST	<input type="checkbox"/> NY	<input type="checkbox"/>
--	---------------------------------	-------------------------------	-----------------------------	--------------------------

*Funds Approval*

3/27/09

- ☐ TRIAD  
☐ PURCHASE CARD  
☐ REIMBURSABLE

*Final Review*

☒

*Commit/Copy/File*

☒

4/30/07

*Send to:*

☐

☐

☐

FBIHQ Rm 5270)

☐ (Investment Management Unit, 616 H. St. NW, Suite 703, Gallery Place) IT Acquisitions

☐ Acquisition Strategy and Planning Unit (FBIHQ, Rm. 6863)

\*\*\* PLEASE SEND TO INDIVIDUAL MARKED BELOW WHEN FINISHED \*\*\*

☐

☐

☐

☐

☐

☐

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Rev. 12-01-08

☒ Routine  
☐ Priority  
☐ Expedite

OPERATIONAL TECHNOLOGY DIVISION (OTD)  
Engineering Research Facilities, Quantico, VA

REQUISITION #

Entered in PAMS by: ☒ YES

REQUISITION (FD-369)  
COVER SHEET

b7E

REQUIRED 1. ☒

REQUIRED DOCUMENTATION

- ☒ CAR Acquisition Security Request Form  
☒ CAR Acquisition Security Unit Checklist  
☒ Statement of Need (Required for Requisitions \$100,000 and Under)  
☐ EC (Required for Requisitions Over \$100,000)  
☐ Acquisition Plan FD-911 (Required for Requisitions Over \$5,000,000)  
☒ Market Research or Sole Source Justification

Additional Requirements for IT Acquisitions Only

- ☐ COTS Approval (For IT Non-Baseline Acquisitions)  
☐ CIO Signed IT Acquisition Form (For Acquisitions Above \$25,000)

REQUIRED 2. ☒

UNIT CHIEF APPROVAL

UC

initial

3. ☒

TMSU - Contract Review (CAO) / Project Review (PMO)

If the answer to either question is YES, requisition must be sent to TMS

Is this request funding a Project?

Yes ☐ No ☒

Is this request funding a Service Contract?

Yes ☒ No ☐

initial

3/27/09

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4. ☐

OVER \$100,000 - OTD SECTION CHIEF APPROVAL

initial

5. ☐

OVER \$250,000 - DEPUTY ASSISTANT DIRECTOR APPROVAL

initial

6. ☐

OVER \$1,000,000 - ASSISTANT DIRECTOR APPROVAL

initial

7. ☐

REQUISITION WITH EC ATTACHED:

for uploading

initial

OR - alternate

initial

REQUIRED 8. ☒

STRATEGIC RESOURCES UNIT (SRU) - FUNDING APPROVAL  
AND ROUTE TO CONTRACTING

DTP: All Accounts

initial

TES&S: Services, Training

initial

TES&S: Equipment, Supplies

initial

CYBER TRIAD: All Accounts

initial

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CREW-2165



# Acquisition Security Unit Checklist

Version 2 - 08/28/08

Previous versions are obsolete.

COMPLETED BY REQUESTOR	
Request Date:	03/20/2009
Anticipated Procurement Date:	3/23/09
Requisition #:	
Point Of Contact:	
POC Phone #:	
Comments:	
HIGHEST CLASSIFICATION REQUIRED FOR VENDOR TO PROVIDE SERVICES/PRODUCTS (Access to FBI systems? Access to classified information?)	
<input checked="" type="checkbox"/> UNCLASSIFIED <input type="checkbox"/> SECRET <input type="checkbox"/> TOP SECRET <input type="checkbox"/> TOP SECRET/SCI	
ASU USE ONLY	
Date Received: _____ Date Additional Information Requested: _____ Date Returned: _____	ASU POC: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Classified Contract (DD 254 Required) <input type="checkbox"/> Contracting Officer's Security Representative <input type="checkbox"/> E-QIP Special Security Requirements <input type="checkbox"/> DOJ Procurement Guidance for Security Systems and Data, including Personally Identifiable Information (PII) Special Security Requirements <input type="checkbox"/> DOJ Consent for Warrantless Searches of DOJ Workplaces <input type="checkbox"/> Community Acquisition Risk Section (CARS) Special Security Requirement (CARS Assessment Required) <input type="checkbox"/> Personnel Security Special Security Requirements <input type="checkbox"/> Source Selection Evaluation Board (SSEB) Requirements for Classified Contracts Special Security Requirements	
ASU SPECIAL NOTES	
<input type="checkbox"/> Required if not already accomplished as part of the original contract award <input type="checkbox"/> Required if connected to a FISMA or Critical Asset System (i.e. _____) <input type="checkbox"/> Intergovernmental procurement <input type="checkbox"/> No actions related to security were identified in the documentation provided	
PRIORITY	
All requests will be handled by date received by ASU unless specific issues affecting the priority, i.e. Director's Priority, are specifically provided in writing by the requestor.	
ACKNOWLEDGEMENT	
ASU	Date

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Please attach the completed checklist to your package at submission to Finance.

CREW-2167

# ACQUISITION SECURITY REQUEST

Request Date: 3/20/09	Anticipated Procurement Date: 3/23/09
<b>VENDOR INFORMATION</b>	
<input type="checkbox"/> Reseller With Access to FBI Facilities <input type="checkbox"/> Reseller With <u>No</u> Access to FBI Facilities	
Vendor Name:	
Vendor Address:	
<input type="checkbox"/> Manufacturer	<input type="checkbox"/> Hardware <input type="checkbox"/> Software
Vendor Name:	
Vendor Address:	
<input checked="" type="checkbox"/> Contractor Providing Classified Services	
Vendor Name:	
Vendor Address:	
<b>PRODUCT/SERVICES INFORMATION</b>	
<input type="checkbox"/> FISMA System <input type="checkbox"/> Critical Asset System <input type="checkbox"/> Telecommunications <input type="checkbox"/> Audiovisual	
1. Products being procured (list the specific hardware / software / services in detail)	Services: [REDACTED]
2. What entity will be purchasing and using the product (Location, Division, Section, Unit, and Program)?	OTD/TPS/TRU Quantico, VA
3. Network on which product/service is to be used (i.e. [REDACTED] etc.)	N/A
4. Highest Classification / Security Requirements (i.e. Top Secret, Top Secret SCI, Secret, SBU, LES, etc.)	unclassified
5. Who is installing and maintaining the equipment/software (FBI personnel, vendor, other)?	Vendor
6. Will the vendor require access to classified information/systems?	no
7. Other information/comments?	
<b>PROCUREMENT INFORMATION</b>	
Contracting Officer Name/ Phone:	
FBI COTR Name/Phone:	
Requisition Number:	
Purchase Order Number:	
Contract Number:	
<b>DOCUMENTATION ATTACHED</b>	
<input type="checkbox"/> Answers to the Acquisition Risk Questions (the replacement for the SF-328)	
<input type="checkbox"/> Key Management Personnel Listing (KMPL)	
<input type="checkbox"/> FD-369 Requisition for Supplies and/or Equipment	
<b>PRIORITY</b>	
All requests will be handled by date received by ASU unless specific issues affecting the priority, i.e. Director's Priority, are specifically provided in writing by the Contracting Officer.	
Comments:	

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PS

REMIT TO VENDOR SETUP

VRS

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

04/16/2009 17:08:31

PAY ENTITY :  
VENDOR NUMBER :  
GROUP NUMBER :  
SHORT NAME :  
VENDOR TYPE :

REMIT TO VENDOR NAME:

STREET / PO:  
SUITE / APT:  
CITY :  
OPT ADDR 1:  
OPT ADDR 2:  
CONTACT :

--- EFT INFORMATION ---

ACCOUNT :  
BANK RTN :  
SAVINGS :  
TAX ID NO:

PHONE :  
STATE CODE :  
POSTAL CODE :  
OPT ADDR USE :  
OPT STATE CD :  
OPT POSTAL CD:

PAYMENT TERMS : STATUS: REMIT HOLD:

--- CONSOLIDATED REPORTING INFORMATION ---

PAY ENTITY :  
VENDOR NUMBER :  
GROUP NUMBER :

4A0

06,018

b7E

PS

PO INVOICE MATCHING INFORMATION

PMI

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 10/14/2009 14:13:30  
BROWSE: \_

=====

BUY ENTITY  
PO NO.  
PO LINE NO.  
BLANKET REL. NO.  
CURRENCY CODE  
PAYMENT BASIS

:  
:  
:  
:  
:  
:  
:

VENDOR:

b7E

BASE PERMIT TO PAY      INVOICED TO DATE      PERMIT TO PAY

PO HEADER  
PO HEADER TAX/VAT  
PO HEADER ADDL COST  
BLANKET  
BLANKET TAX/VAT  
BLANKET ADDL COST  
PO LINE  
PO LINE TAX/VAT  
PO LINE ADDL COST

:  
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07,024

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PS

PO LINE RECEIPT/INVOICE INFORMATION

PLR

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 10/14/2009 14:13:35  
BROWSE: \_

BUY ENTITY

PO NO.

PO LINE NO.

BLANKET REL. NO.

-----RECEIVED-----

STATUS

QUANTITY DELIVERED UOP:

QUANTITY RETURNED UOP:

QUANTITY DELIVERED SKU:

QUANTITY RETURNED SKU:

LAST RECEIPT DATE

-----INSPECTED-----

DOCK-TO-STOCK PENDING

QTY ACCEPTED/NOT INSP

QTY ACCEPTED/INSP

TOTAL QTY ACCEPTED SKU:

QUANTITY REJECTED

QTY DUE INVENTORY SKU

-----ORDERED-----

UNIT OF PURCHASE

UNIT PRICE

QUANTITY ORDERED UOP:

SKU

SKU CONV. FACTOR

QUANTITY ORDERED SKU:

STD LOT SIZE QTY

-----INVOICED-----

STATUS

CURRENCY CODE

QUANTITY INVOICED UOP:

AMOUNT INVOICED

TAX AMOUNT INVOICED

ADDL COST INVOICED

LAST INVOICE DATE

LAST INVOICE PRICE

4A0

07,026

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PS

PO HEADER GENERAL INFORMATION

PHG

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 10/14/2009 14:13:38  
BROWSE: \_

BUY ENTITY :  
PO NO. :

PO TYPE :  
SERVICE ORDER :  
PO PRIORITY :  
ORIGINATION CODE :

BUYER ID :

LAST RECEIPT DATE :  
LAST INVOICE DATE : 07/10/2009  
EARLIEST DELIVERY : 04/30/2009  
EARLIEST FOLLOW-UP:

CURRENCY CODE :

PO STATUS :  
DATE ENTERED :  
DATE LAST PRINTED :  
DATE LAST ACTIVITY :  
GL EFFECTIVE DATE :  
REPRINT NO. :  
CHANGE NOTICE NO. :  
SUPPRESS PO PRINT :  
OPEN LINES :  
CLOSED LINES :  
CANCELLED LINES :  
UNRESOLVED LINES :  
TOTAL LINES :

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07,027

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AP

PURCHASE ORDER TO INVOICE LIST

PIL

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 10/14/2009 14:13:45

BUY ENTITY :

PO NUMBER :

ERS :

CURRENCY CODE:

BLANKET RELEASE NBR: \_\_\_\_\_ PO LINE : 0000

b7E

PO LINE	PAY ENT	VENDOR NUMBER	INVOICE NUMBER	INVOICE DATE	DISTR LINE	EXPENSE AMOUNT	ACT
<input type="text"/>			<input type="text"/>	06/23/2009	0001	<input type="text"/>	—

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PAGE: 1 STATUS: END OF LIST

06,015

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AP

DOCUMENT PAYMENT GENERAL INFORMATION

DPG

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 10/14/2009 14:13:49  
BROWSE: \_

=====

PAY ENTITY	:		VEND/EMP NBR:	:	
VEND/EMP SHORT NAME:	:		DOCUMENT NBR:	:	
DOCUMENT DATE	:		PAYMENT NBR:	001	PRTL PYMT NBR: 000

	IND	AMOUNT			
SALES TAX/VAT	:		VAT INCLUSIVE	:	
SALES TAX 2	:		EXPENSE IND	:	
SALES TAX 3	:		GL EFFECTIVE DATE:	:	
FREIGHT	:		EXTRACT DATE	:	
ADDITIONAL COST	:		ACCRUAL CANC DATE:	:	
ADV/EXP NBR	:		ADV/EXP DATE	:	
GROSS INVOICE	:		CURRENCY CODE	:	
PAYMENT AMOUNT	:		DISCOUNT TYPE	:	
AMOUNT PAID	:		DISCOUNT TAKEN	:	
	:		PAYMENT STATUS	:	
PAYMENT TERMS	:		PAYMENT REF NBR	:	
PAYMENT DATE	:		PAYMENT TYPE	:	
PAYMENT ROUTE CD	:		HANDLING CODE	:	
FACTOR NUMBER	:		ONE INVC PER PYMT:	:	
REASON CODE/DESC	:	BANK ACCT PYMT CD:	:		

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PS

PO INVOICE MATCHING INFORMATION

PMI

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 07/14/2009 10:29:28  
BROWSE: \_

=====

BUY ENTITY  
PO NO.  
PO LINE NO.  
BLANKET REL. NO.  
CURRENCY CODE  
PAYMENT BASIS

:

:

:

:

:

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:

VENDOR:

:

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BASE PERMIT TO PAY    INVOICED TO DATE    PERMIT TO PAY

PO HEADER  
PO HEADER TAX/VAT  
PO HEADER ADDL COST  
BLANKET  
BLANKET TAX/VAT  
BLANKET ADDL COST  
PO LINE  
PO LINE TAX/VAT  
PO LINE ADDL COST

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12-201 (Rev. 9-6-2006)



U.S. Department of Justice  
Federal Bureau of Investigation



Purchase Order for Supplies or Services					
1. Date of Order <b>04/16/2009</b>	2. Order No. [Redacted]	3. Mod. No.	4. Mod. Date	5. Page No. <b>1</b>	
6. To Contractor (Name, Address and Zip Code): [Redacted]		7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 2795BA QUANTICO, VA 22135</b>			
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6B23, JEH F.B.I. BLDG. WASHINGTON, D. C. 20535</b>		9. Send Invoice to: (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 2795BA QUANTICO, VA 22135</b>			
10. Business Classification		11. F.O.B. Point <b>DESTINATION</b>		12. Discount Terms <b>NET 30 DAYS</b>	
13. Schedule					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
[Redacted]					
PLEASE ACKNOWLEDGE ACCEPTANCE OF THE TERMS AND CONDITIONS OF THIS ORDER BY SIGNING AND RETURNING THE ENCLOSED YELLOW COPY WITHIN 10 DAYS TO THE ADDRESS IN BOX # 7. * * (SIGNATURE) (DATE)					
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and Conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions con- tained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.			15. Grand Total XXXXXXXXXXXX See Instructions on Reverse		
Point of Contact - Purchase Order Information:			16. United States of America By (Signature)		
Point of Contact - Invoice Payment Status: Commercial Payments Unit [Redacted]			17. Name (Typed) XXXXXXXXXX Title: Contracting Officer		

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C - PROCUREMENT

CREW-2185



**U.S. Department of Justice  
Federal Bureau of Investigation**



Purchase Order for Supplies or Services					
1. Date of Order <b>04/16/2009</b>	2. Order No. [REDACTED]	3. Mod. No.	4. Mod. Date	5. Page No. <b>2</b>	
6. To Contractor (Name, Address and Zip Code): [REDACTED]			7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 27958A QUANTICO, VA 22135</b>		
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 4B23, JEH F.B.I. BLDG. WASHINGTON, D. C. 20535</b>			9. Send Invoice to: (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 27958A QUANTICO, VA 22135</b>		
10. Business Classification		11. F.O.B. Point <b>DESTINATION</b>		12. Discount Terms <b>NET 30 DAYS</b>	
13. Schedule					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
<p><b>ALL PAYMENTS BY THE GOVERNMENT UNDER THIS ORDER SHALL BE MADE BY ELECTRONIC FUNDS TRANSFER (EFT). THE VENDOR SHALL PROVIDE THIS INFORMATION ON EACH INVOICE OR SUBMIT SF-3881 FORM TO: FBI, COMMERCIAL PAYMENTS UNIT RM. 1987, J. EDGAR HOOVER BLDG 935 PENNSYLVANIA AVENUE, NW WASHINGTON, DC 20535</b></p> <p><b>IF THIS INFORMATION IS NOT AVAILABLE TO THE GOVERNMENT, THE INVOICE WILL BE CONSIDERED AN IMPROPER INVOICE AND SHALL BE RETURNED.</b></p> <p><b>THIS PURCHASE IS NEGOTIATED UNDER THE AUTHORITY OF: TLE 41, USC 253(C)(1)</b></p> <p><b>A PROPER INVOICE SUBMITTED FOR PAYMENT TO THE FBI MUST CONTAIN THE FOLLOWING: THE NAME OF THE VENDOR; AN INVOICE NUMBER; THE CONTRACT OR PURCHASE ORDER NUMBER; THE INVOICE DATE; DESCRIPTION (I.E. NAME OR ITEM LINE NUMBER), PRICE AND QUANTITY OF GOODS OR SERVICES RENDERED; SHIPPING AND/OR PAYMENT TERMS; TAXPAYER ID#;</b></p>					
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and Conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.				15. Grand Total <b>XXXXXXXXXXXX</b> <i>See Instructions on Reverse</i>	
Point of Contact - Purchase Order Information:			16. United States of America By (Signature)		
Point of Contact - Invoice Payment Status: Commercial Payments Unit - [REDACTED]			17. Name (Typed) <b>XXXXXXXXXXXX</b> Title: Contracting Officer		

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**C - PROCUREMENT**

CREW-2186



**U.S. Department of Justice  
Federal Bureau of Investigation**



Purchase Order for Supplies or Services					
1. Date of Order <b>04/16/2009</b>	2. Order No. [Redacted]	3. Mod. No.	4. Mod. Date	5. Page No. <b>3</b>	
6. To Contractor (Name, Address and Zip Code): [Redacted]			7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27958A QUANTICO, VA 22135</b>		
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6823, JEH F.B.I. BLDG. WASHINGTON, D. C. 20535</b>			9. Send Invoice to: (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27958A QUANTICO, VA 22135</b>		
10. Business Classification		11. F.O.B. Point <b>DESTINATION</b>		12. Discount Terms <b>NET 30 DAYS</b>	
13. Schedule					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
	<b>BANKING / ROUTING NUMBER TO ALLOW EFT PAYMENT; CONTACT NAME, TITLE AND TELEPHONE NUMBER AND ANY OTHER SUBSTANTIATING DOCUMENTATION AS REQUIRED BY THE CONTRACT. FAR CLAUSE 52.204-7 AND ITS ALTERNATE 1 -- OR, IF A COMMERCIAL ITEM OR SERVICE, ADDENDUM TO 52.212-4, CONTRACT TERMS AND CONDITIONS - COMMERCIAL ITEMS APPLY TO THIS PURCHASE ORDER. THESE CLAUSES REQUIRE THE CONTRACTOR TO BE REGISTERED IN THE CCR DATABASE AND MAINTAIN REGISTRATION UNTIL FINAL PAYMENT. *****FOR FBI INFO ONLY*****</b>				
14. Type of Order <input checked="" type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <b>CONTRACTOR NUMBER</b> [Redacted] <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.				15. Grand Total [Redacted]	
Point of Contact - Purchase Order Information: [Redacted]		16. United States of America By [Redacted] 17. Name [Redacted] Title: Contracting Officer			

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**C - PROCUREMENT**

PS

PO INVOICE MATCHING INFORMATION

PMI

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 09/22/2009 08:52:46  
BROWSE: \_

=====

BUY ENTITY :  
PO NO. :  
PO LINE NO. :  
BLANKET REL. NO. :  
CURRENCY CODE :  
PAYMENT BASIS :

VENDOR:

BASE PERMIT TO PAY

INVOICED TO DATE

PERMIT TO PAY

PO HEADER :  
PO HEADER TAX/VAT :  
PO HEADER ADDL COST :  
BLANKET :  
BLANKET TAX/VAT :  
BLANKET ADDL COST :  
PO LINE :  
PO LINE TAX/VAT :  
PO LINE ADDL COST :

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PS

VENDOR GENERAL INFORMATION

VGN

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

06/18/2009 10:45:42

REQUEST: g\_\_\_\_\_

PAY ENTITY :

SHORT NAME :

VENDOR NUMBER:

GROUP:

1:BUS TYPE - 2:WOMAN/SM.BUS

1: B

2: N

3: \_\_\_\_\_

4: \_\_\_\_\_

5: \_\_\_\_\_

DUNS NUMBER

D & B RATING DATE

D & B RATING

D & B APPRAISAL

SIC CODE

LABOR CONTRACT DATE

EST EXPENDITURE

TAX CERTIFICATION NBR:

EXPIRE DT: \_\_\_\_\_

CEC NUMBER

USER FIELD 1

COMMENT 1: \_\_\_\_\_

COMMENT 2: \_\_\_\_\_

COMMENT 3: \_\_\_\_\_

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PS

REQUISITION HEADER

RQH

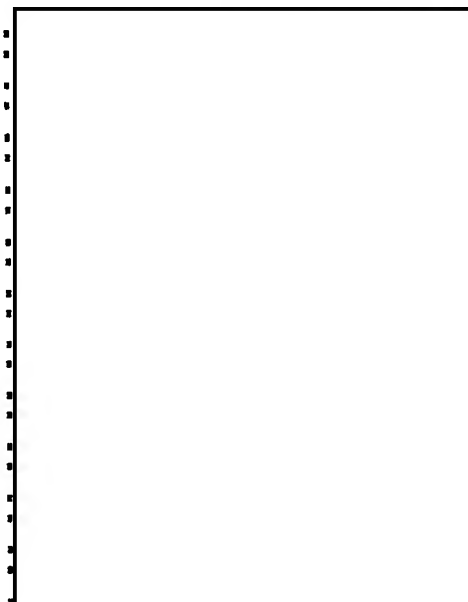
NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

05/26/2009 10:57:33

REQUEST: g\_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

=====

BUY ENTITY	:	
REQUISITION NO.	:	
REQUESTER ID	:	
REQUISITION TOTAL	:	
REQUISITION LINE TOTAL	:	
DIFFERENCE	:	
BUYER ID	:	
REQUISITION STATUS	:	
GL EFFECTIVE DATE	:	
DATE ENTERED	:	
DATE LAST UPDATED	:	
SIGNATURE APPROVAL	:	
UNRESOLVED LINES	:	0
OPEN LINES	:	2
PARTIALLY CLOSED LINES	:	0
CLOSED LINES	:	0
TOTAL LINES	:	2

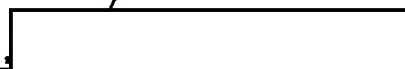


RECEIVED  
MAY 26 2009

BY: \_\_\_\_\_

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NOTES: ENTERED 4/15/09 BY \_\_\_\_\_ SENT TO ASAPU \_\_\_\_\_  
4/17/09, FRWD TO QCU 5/20 \_\_\_\_\_



<ASAPU RECD

RCVD QCU 5/26

07,048

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PS

REQUISITION HEADER

RQH

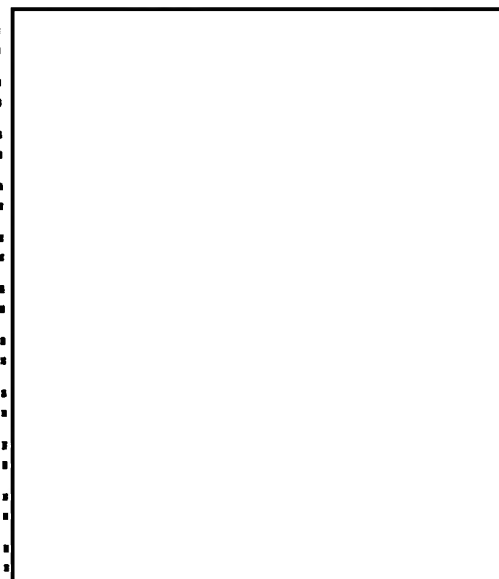
NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

05/20/2009 09:43:34

REQUEST: G\_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

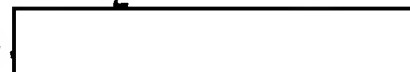
=====

BUY ENTITY	:	
REQUISITION NO.	:	
REQUESTER ID	:	
REQUISITION TOTAL	:	
REQUISITION LINE TOTAL	:	
DIFFERENCE	:	
BUYER ID	:	
REQUISITION STATUS	:	
GL EFFECTIVE DATE	:	
DATE ENTERED	:	
DATE LAST UPDATED	:	
SIGNATURE APPROVAL	:	
UNRESOLVED LINES	:	0
OPEN LINES	:	2
PARTIALLY CLOSED LINES	:	0
CLOSED LINES	:	0
TOTAL LINES	:	2



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b7E

NOTES: ENTERED 4/15/09 BY  SENT TO ASAPU   
4/17/09, FRWD TO QCU 5/20>



<ASAPU RECD

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PS

REQUISITION LINE

RQ1

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

05/20/2009 09:43:44

REQUEST: G\_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

=====

BUY ENTITY :  
REQ. LINE NO. :  
BUYER ID :  
CATALOG NO. :  
ITEM DESCRIPTION :  
QUANTITY REQUIRED SKU :  
UNIT PRICE :  
REQUIRED DATE :  
GL EFFECTIVE DATE :

REQUISITION NO. :  
REQUESTER ID :  
PRIORITY :  
ITEM NO. :

SKU :  
PRICE TYPE :  
SHIP TO CODE :

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PREFERRED VENDOR/QUOTE

PAY ENTITY :

VENDOR NO :  
OR SHORT NAME :  
ITEM SEQ NO. :

GROUP NUMBER :

QUOTE NUMBER :

QUOTE REQUIRED : N

GL COMPANY :  
GL CENTER :  
PROJECT CO. :

GL ACCOUNT :  
DISTRIB IND :  
PROJECT CODE :

ACCOUNTING RULE: 01

DSP DEFAULTS : \_ PASS : \_  
4A0

CONT TO RQ2 : \_

LINE STATUS : 2  
07,025

PS

REQUISITION LINE

RQ1

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

05/20/2009 09:43:44

REQUEST: G\_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

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BUY ENTITY  
REQ. LINE NO.  
BUYER ID  
CATALOG NO.  
ITEM DESCRIPTION  
QUANTITY REQUIRED SKU  
UNIT PRICE  
REQUIRED DATE  
GL EFFECTIVE DATE

[Redacted]

REQUISITION NO.:  
REQUESTER ID  
PRIORITY  
ITEM NO.

SKU  
PRICE TYPE  
SHIP TO CODE

[Redacted]

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b7C  
b7E

PREFERRED VENDOR/QUOTE

PAY ENTITY :

[Redacted]

VENDOR NO :

[Redacted]

GROUP NUMBER :

[Redacted]

QUOTE NUMBER :

OR SHORT NAME :

ITEM SEQ NO. :

QUOTE REQUIRED : N

GL COMPANY :

GL ACCOUNT :

[Redacted]

GL CENTER :

DISTRIB IND :

[Redacted]

PROJECT CO. :

PROJECT CODE :

ACCOUNTING RULE: 01

DSP DEFAULTS :

CONT TO RQ2 :

LINE STATUS : 2

4A0

07,025

TRU  
Unit

☒ ROUTINE      ☐ PRIORITY      ☐ EXPEDITE

SRU ROUTING SLIP

☒ FY09    ☐ FY08-9    ☐ CNST    ☐ NY    ☐

*Funds Approval*

- ☐ TRIAD  
☐ PURCHASE CARD  
☐ REIMBURSABLE

*Final Review*

☒

*Commit/Copy/File*

☒

4/15/09

*Send to:*

☐

☐

☐

☐ FBIHQ Rm 5270)

☐ (Investment Management Unit, 616 H. St. NW, Suite 703, Gallery Place) IT Acquisitions

☒ Acquisition Strategy and Planning Unit (FBIHQ, Rm. 6863)

**PLEASE SEND TO INDIVIDUAL MARKED BELOW WHEN FINISHED**

☐

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Rev 12-01-08

☒ Routine  
☐ Priority  
☐ Expedite

OPERATIONAL TECHNOLOGY DIVISION (OTD)  
Engineering Research Facilities Quantico, VA

REQUISITION #

Entered in PAMS: ☒ YES

**REQUISITION (FD-369)  
COVER SHEET**

b7E

REQUIRED 1. ☒ **REQUIRED DOCUMENTATION**

- ☒ CAR Acquisition Security Request Form  
☒ CAR Acquisition Security Unit Checklist  
☒ Statement of Need (Required for Requisitions \$100,000 and Under)  
☐ EC (Required for Requisitions Over \$100,000)  
☐ Acquisition Plan FD-911 (Required for Requisitions Over \$5,000,000)  
☒ Market Research or Sole Source Justification

Additional Requirements for IT Acquisitions Only

- ☐ COTS Approval (For IT Non-Baseline Acquisitions)  
☐ CIO Signed IT Acquisition Form (For Acquisitions Above \$25,000)

REQUIRED 2. ☒ **UNIT CHIEF APPROVAL**

UC

initial

3. ☒ **TMSU - Contract Review (CAO) / Project Review (PMO)**

If the answer to either question is YES, requisition must be sent to TMSU:

Is this request funding a Project?

Yes ☐ No ☒

Is this request funding a Service Contract?

Yes ☐ No ☒

initial

4. ☐ **OVER \$100,000 - OTD SECTION CHIEF APPROVAL**

initial

5. ☐ **OVER \$250,000 - DEPUTY ASSISTANT DIRECTOR APPROVAL**

initial

6. ☐ **OVER \$1,000,000 - ASSISTANT DIRECTOR APPROVAL**

initial

7. ☐ **REQUISITION WITH EC ATTACHED:**

for uploading

initial

OR - alternate

initial

REQUIRED 8. ☒ **STRATEGIC RESOURCES UNIT (SRU) - FUNDING APPROVAL  
AND ROUTE TO CONTRACTING**

DTP: All Accounts

initial

TFS&S: Services, Training

initial

TFS&S: Equipment, Supplies

initial

CYBER TRIAD: All Accounts

initial

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b6  
b7C

CREW-2210

# Acquisition Security Unit Checklist

Version 2 - 08/28/08

Previous versions are obsolete.

COMPLETED BY REQUESTOR	
Request Date:	4/14/09
Anticipated Procurement Date:	4/14/09
Requisition #:	
Point Of Contact:	
POC Phone #:	
Comments:	

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HIGHEST CLASSIFICATION REQUIRED FOR VENDOR TO PROVIDE SERVICES/PRODUCTS (Access to FBI systems? Access to classified information?)
<input checked="" type="checkbox"/> UNCLASSIFIED <input type="checkbox"/> SECRET <input type="checkbox"/> TOP SECRET <input type="checkbox"/> TOP SECRET/SCI

ASU USE ONLY	
Date Received: 5/18/09	ASU POC:
Date Additional Information Requested: _____	
Date Returned: _____	

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- ☐ Classified Contract (DD 254 Required)
- ☐ Contracting Officer's Security Representative
- ☐ E-QIP Special Security Requirements
- ☐ DOJ Procurement Guidance for Security Systems and Data, including Personally Identifiable Information (PII) Special Security Requirements
- ☐ DOJ Consent for Warrantless Searches of DOJ Workplaces
- ☐ Community Acquisition Risk Section (CARS) Special Security Requirement (CARS Assessment Required)
- ☐ Personnel Security Special Security Requirements
- ☐ Source Selection Evaluation Board (SSEB) Requirements for Classified Contracts Special Security Requirements

ASU SPECIAL NOTES
<input type="checkbox"/> Required if not already accomplished as part of the original contract award
<input type="checkbox"/> Required if connected to a FISMA or Critical Asset System (i.e. _____)
<input type="checkbox"/> Intergovernmental procurement
<input checked="" type="checkbox"/> No actions related to security were identified in the documentation provided

b7E

PRIORITY
All requests will be handled by date received by ASU unless specific issues affecting the priority, i.e. Director's Priority, are specifically provided in writing by the requestor.

ACKNOWLEDGEMENT
<div>ASU</div> <div>5/18/09 Date</div>

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Please attach the completed checklist to your package at submission to Finance.

CREW-2214

# ACQUISITION SECURITY REQUEST

Request Date: 4/14/09	Anticipated Procurement Date: 4/14/09
<b>VENDOR INFORMATION</b>	
<input type="checkbox"/> Reseller With Access to FBI Facilities <input checked="" type="checkbox"/> Reseller With <u>No</u> Access to FBI Facilities	
Vendor Name:	
Vendor Address:	
<input checked="" type="checkbox"/> Manufacturer	<input checked="" type="checkbox"/> Hardware <input type="checkbox"/> Software
Vendor Name:	
Vendor Address:	
<input type="checkbox"/> Contractor Providing Classified Services	
Vendor Name:	
Vendor Address:	
<b>PRODUCT/SERVICES INFORMATION</b>	
<input type="checkbox"/> FISMA System <input type="checkbox"/> Critical Asset System <input type="checkbox"/> Telecommunications <input type="checkbox"/> Audiovisual	
1. Products being procured (list the specific hardware / software / services in detail)	
2. What entity will be purchasing and using the product (Location, Division, Section, Unit, and Program)?	OTD/TPS/TRU Quantico, VA
3. Network on which product/service is to be used (i.e. [redacted] etc.)	N/A
4. Highest Classification / Security Requirements (i.e. Top Secret, Top Secret SCI, Secret, SBU, LES, etc.)	N/A
5. Who is installing and maintaining the equipment/software (FBI personnel, vendor, other)?	FBI personnel
6. Will the vendor require access to classified information/systems?	No
7. Other information/comments?	
<b>PROCUREMENT INFORMATION</b>	
Contracting Officer Name/ Phone:	
FBI COTR Name/Phone:	
Requisition Number:	
Purchase Order Number:	
Contract Number:	
<b>DOCUMENTATION ATTACHED</b>	
<input type="checkbox"/> Answers to the Acquisition Risk Questions (the replacement for the SF-328)	
<input type="checkbox"/> Key Management Personnel Listing (KMPL)	
<input type="checkbox"/> FD-369 Requisition for Supplies and/or Equipment	
<b>PRIORITY</b>	
All requests will be handled by date received by ASU unless specific issues affecting the priority, i.e. Director's Priority, are specifically provided in writing by the Contracting Officer.	
Comments:	

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12-201 (Rev. 9-6-2006)

**FBI**

U.S. Department of Justice  
Federal Bureau of Investigation



**Purchase Order for Supplies or Services**

1. Date of Order 06/18/2009		2. Order No. [Redacted]		3. Mod. No.		4. Mod. Date		5. Page No. 1	
6. To Contractor (Name, Address and Zip Code): [Redacted]				7. Ship to (Consignee and address, Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27958A QUANTICO, VA 22135					
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6823, JEN F.B.I. BLDG. WASHINGTON, D. C. 20535				9. Send Invoice to: (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27958A QUANTICO, VA 22135					
10. Business Classification OTHER SMALL BUSINESS		11. F.O.B. Point S/P - PRE-PAID				12. Discount Terms NET 30 DAYS			
13. Schedule									
Line No. (A)	Supplies or Services (B)			Quantity Ordered (C)	Unit (D)	Unit Price (E)		Amount (F)	
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and Conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.						15. Grand Total XXXXXXXXXXXX See Instructions on Reverse			
Point of Contact - Purchase Order Information:					16. United States of America By (Signature)				
Point of Contact - Invoice Payment Status: Commercial Payments Unit [Redacted]					17. Name (Typed) XXXXXXXXXXXX Title: Contracting Officer				

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**C - PROCUREMENT**

CREW-2216

**FBI**

**U.S. Department of Justice  
Federal Bureau of Investigation**



**Purchase Order for Supplies or Services**

1. Date of Order <b>06/18/2009</b>		2. Order No. <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>		3. Mod. No.		4. Mod. Date		5. Page No. <b>2</b>	
6. To Contractor (Name, Address and Zip Code): <div style="border: 1px solid black; width: 300px; height: 50px; margin-top: 5px;"></div>				7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span> BUILDING 27958A QUANTICO, VA 22135</b>					
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6825, JEN F.B.I. BLDG. WASHINGTON, D. C. 20555</b>				9. Send Invoice to: (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span> BUILDING 27958A QUANTICO, VA 22135</b>					
10. Business Classification <b>OTHER SMALL BUSINESS</b>			11. F.O.B. Point <b>S/P - FRE-PAID</b>			12. Discount Terms <b>NET 30 DAYS</b>			
13. Schedule									
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)				
	<p>THIS PURCHASE IS NEGOTIATED UNDER THE AUTHORITY OF: TLE 41, USC 253(C)(1)</p> <p>*****FOR FBT INED ONLY*****</p> <div style="border: 1px solid black; width: 400px; height: 20px; margin-top: 5px;"></div>								
14. Type of Order						15. Grand Total			
<input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated.						<input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.			
CONTRACTOR NUMBER <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>						See Instructions on Reverse			
Point of Contact - Purchase Order Information: <div style="border: 1px solid black; width: 200px; height: 40px; margin-top: 5px;"></div>						16. United States of America By (Signature) <span style="border: 1px solid black; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span>			
						17. Name (Typed) <span style="border: 1px solid black; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span> Title: Contracting Officer <span style="border: 1px solid black; display: inline-block; width: 50px; height: 1.2em; vertical-align: middle;"></span>			

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**C - PROCUREMENT**

CREW-2217



Version 2 - 08/28/08  
Previous versions are obsolete.

# Acquisition Security Unit Checklist

COMPLETED BY REQUESTOR	
Request Date:	7-7-09
Anticipated Procurement Date:	7/13/09
Requisition #:	
Point Of Contact:	
POC Phone #:	
Comments:	
HIGHEST CLASSIFICATION REQUIRED FOR VENDOR TO PROVIDE SERVICES/PRODUCTS (Access to FBI systems? Access to classified information?)	
<input checked="" type="checkbox"/> UNCLASSIFIED <input type="checkbox"/> SECRET <input type="checkbox"/> TOP SECRET <input type="checkbox"/> TOP SECRET/SCI	
ASU USE ONLY	
Date Received: _____ Date Additional Information Requested: _____ Date Returned: _____	ASU POC: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
<input type="checkbox"/> Classified Contract (DD 254 Required) <input type="checkbox"/> Contracting Officer's Security Representative <input type="checkbox"/> E-QIP Special Security Requirements <input type="checkbox"/> DOJ Procurement Guidance for Security Systems and Data, including Personally Identifiable Information (PII) Special Security Requirements <input type="checkbox"/> DOJ Consent for Warrantless Searches of DOJ Workplaces <input type="checkbox"/> Community Acquisition Risk Section (CARS) Special Security Requirement (CARS Assessment Required) <input type="checkbox"/> Personnel Security Special Security Requirements <input type="checkbox"/> Source Selection Evaluation Board (SSEB) Requirements for Classified Contracts Special Security Requirements	
ASU SPECIAL NOTES	
<input type="checkbox"/> Required if not already accomplished as part of the original contract award <input type="checkbox"/> Required if connected to a FISMA or Critical Asset System (i.e. _____) <input type="checkbox"/> Intergovernmental procurement <input type="checkbox"/> No actions related to security were identified in the documentation provided	
PRIORITY	
All requests will be handled by date received by ASU unless specific issues affecting the priority, i.e. Director's Priority, are specifically provided in writing by the requestor.	
ACKNOWLEDGEMENT	
_____ ASU	
_____ Date	

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Please attach the completed checklist to your package at submission to Finance.

CREW-2223

1 REQUISITION SECURITY REQUEST

Request Date: 7/7/09	Anticipated Procurement Date: 7/13/09
<b>VENDOR INFORMATION</b>	
<input type="checkbox"/> Reseller With Access to FBI Facilities <input type="checkbox"/> Reseller With <u>No</u> Access to FBI Facilities	
Vendor Name:	
Vendor Address:	
<input checked="" type="checkbox"/> Manufacturer	<input checked="" type="checkbox"/> Hardware <input type="checkbox"/> Software
Vendor Name:	
Vendor Address:	
<input type="checkbox"/> Contractor Providing Classified Services	
Vendor Name:	
Vendor Address:	
<b>PRODUCT/SERVICES INFORMATION</b>	
<input type="checkbox"/> FISMA System <input type="checkbox"/> Critical Asset System <input type="checkbox"/> Telecommunications <input type="checkbox"/> Audiovisual	
1. Products being procured (list the specific hardware / software / services in detail)	
2. What entity will be purchasing and using the product (Location, Division, Section, Unit, and Program)?	ERP - TRU-DIV-18- TECHNICAL PROGRAMS
3. Network on which product/service is to be used (i.e. [ ] etc.)	N.A.
4. Highest Classification / Security Requirements (i.e. Top Secret, Top Secret SCI, Secret, SBU, LES, etc.)	N.A.
5. Who is installing and maintaining the equipment/software (FBI personnel, vendor, other)?	FBI PERSONNEL
6. Will the vendor require access to classified information/systems?	N.A.
7. Other information/comments?	N.A.
<b>PROCUREMENT INFORMATION</b>	
Contracting Officer Name/ Phone:	
FBI COTR Name/Phone:	
Requisition Number:	
Purchase Order Number:	
Contract Number:	
<b>DOCUMENTATION ATTACHED</b>	
<input type="checkbox"/> Answers to the Acquisition Risk Questions (the replacement for the SF-328)	
<input type="checkbox"/> Key Management Personnel Listing (KMPL)	
<input type="checkbox"/> FD-369 Requisition for Supplies and/or Equipment	
<b>PRIORITY</b>	
All requests will be handled by date received by ASU unless specific issues affecting the priority, i.e. Director's Priority, are specifically provided in writing by the Contracting Officer.	
Comments:	

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2 WKS = 8/14/09

Unit TRU

☒ ROUTINE ☐ PRIORITY ☐ EXPEDITE

SRU ROUTING SLIP

<input checked="" type="checkbox"/> FY09	<input type="checkbox"/> FY08-9	<input type="checkbox"/> CNST	<input type="checkbox"/> NY	<input type="checkbox"/>
--	---------------------------------	-------------------------------	-----------------------------	--------------------------

*Funds Approval*

7/31/09

- ☐ TRIAD  
☐ PURCHASE CARD  
☐ REIMBURSABLE

*Final Review*

*Commit/Copy/File*

7/31/09

*Send to:*

☐ Unit CD-5B, FBIHQ Rm 9904)

☐ (Investment Management Unit, 616 H. St. NW, Suite 703, Gallery Place) IT Acquisitions

☐ Acquisition Strategy and Planning Unit (FBIHQ, Rm. 6863)

\*\*\* PLEASE SEND TO INDIVIDUAL MARKED BELOW WHEN FINISHED \*\*\*

- ☐  
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REQ. #

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Rev. 04-15-09

☒ Routine  
☐ Priority  
☐ Expedite

**OTD END YEAR FUNDS**  
OPERATIONAL TECHNOLOGY DIVISION (OTD)  
Engineering Research Facility, Quantico, VA

REQUISITION # \_\_\_\_\_

b7E

Entered in PAMS by: ☐ No

## REQUISITION (FD-369) COVER SHEET

REQUIRED 1. ☒

### REQUIRED DOCUMENTATION

- ☒ CAR Certification Forms  
☒ Statement of Need (Required for Requisitions \$100,000 and Under)  
☐ EC (Required for Requisitions Over \$100,000)  
☐ Acquisition Plan FD-911 (Required for Requisitions Over \$5,000,000)  
☒ Market Research or Sole Source Justification

#### Additional Requirements for IT Acquisitions Only

- ☐ COTS Approval (For IT Non-Baseline Acquisitions)  
☐ CIO Signed IT Acquisition Form (For Acquisitions Above \$25,000)

REQUIRED 2. ☒

### UNIT CHIEF APPROVAL

UC \_\_\_\_\_

initial

3. ☒

### TMSU - Contract Review (CAO) / Project Review (PMO)

If the answer to either question is YES, requisition must be sent to TMSU:

Is this request funding a Project?

Yes ☐ No ☒

Is this request funding a Service Contract?

Yes ☐ No ☒

initial

4. ☐

### OVER \$100,000 - OTD SECTION CHIEF APPROVAL

initial

5. ☐

### OVER \$250,000 - DEPUTY ASSISTANT DIRECTOR APPROVAL

initial

6. ☐

### OVER \$1,000,000 - ASSISTANT DIRECTOR APPROVAL

initial

7. ☐

### REQUISITION WITH ECs ATTACHED:

\_\_\_\_\_ for uploading

initial

OR - alternate \_\_\_\_\_

initial

REQUIRED 8. ☒

### STRATEGIC RESOURCES UNIT (SRU) - FUNDING APPROVAL AND ROUTE TO CONTRACTING

DTP: All Accounts

\_\_\_\_\_

initial

TFS&S: Services, Training

\_\_\_\_\_

initial

TFS&S: Equipment, Supplies

\_\_\_\_\_

initial

Cyber Funding, TRIAD

\_\_\_\_\_

initial

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b6  
b7C

CREW-2227

PS

REMIT TO VENDOR SETUP

VRS

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

08/06/2009 14:58:58

PAY ENTITY :  
VENDOR NUMBER :  
GROUP NUMBER :  
SHORT NAME :  
VENDOR TYPE :

--- EFT INFORMATION ---  
ACCOUNT :  
BANK RTN :  
SAVINGS :  
TAX ID NO:

REMIT TO VENDOR NAME:

STREET / PO:  
SUITE / APT:  
CITY :  
OPT ADDR 1:  
OPT ADDR 2:  
CONTACT :

PHONE :  
STATE CODE :  
POSTAL CODE :  
OPT ADDR USE :  
OPT STATE CD :  
OPT POSTAL CD:

PAYMENT TERMS :

STATUS:

REMIT HOLD:

--- CONSOLIDATED REPORTING INFORMATION ---

PAY ENTITY :  
VENDOR NUMBER :  
GROUP NUMBER :

4A0

06,018

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PS

PO INVOICE MATCHING INFORMATION

PMI

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 11/19/2009 14:30:02  
BROWSE: \_

=====

BUY ENTITY  
PO NO.  
PO LINE NO.  
BLANKET REL. NO.  
CURRENCY CODE  
PAYMENT BASIS

:

:

:

:

:

:

:

VENDOR:

b7E

BASE PERMIT TO PAY      INVOICED TO DATE      PERMIT TO PAY

PO HEADER  
PO HEADER TAX/VAT  
PO HEADER ADDL COST  
BLANKET  
BLANKET TAX/VAT  
BLANKET ADDL COST  
PO LINE  
PO LINE TAX/VAT  
PO LINE ADDL COST

:

:

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4A0

07,024

PS

PO LINE RECEIPT/INVOICE INFORMATION

PLR

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_\_\_\_\_ 11/19/2009 14:31:17  
BROWSE: \_\_\_\_\_

BUY ENTITY

PO NO.

PO LINE NO.

BLANKET REL. NO.

-----RECEIVED-----

STATUS

QUANTITY DELIVERED UOP:

QUANTITY RETURNED UOP:

QUANTITY DELIVERED SKU:

QUANTITY RETURNED SKU:

LAST RECEIPT DATE

-----INSPECTED-----

DOCK-TO-STOCK PENDING :

QTY ACCEPTED/NOT INSP :

QTY ACCEPTED/INSP :

TOTAL QTY ACCEPTED SKU:

QUANTITY REJECTED :

QTY DUE INVENTORY SKU :

4A0

-----ORDERED-----

UNIT OF PURCHASE

UNIT PRICE

QUANTITY ORDERED UOP:

SKU

SKU CONV. FACTOR

QUANTITY ORDERED SKU:

STD LOT SIZE QTY

-----INVOICED-----

STATUS

CURRENCY CODE

QUANTITY INVOICED UOP:

AMOUNT INVOICED

TAX AMOUNT INVOICED

ADDL COST INVOICED

LAST INVOICE DATE

LAST INVOICE PRICE

07,026

b7E

PS

PO LINE RECEIPT/INVOICE INFORMATION

PLR

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_  
BROWSE: \_

11/19/2009 14:31:17

=====

BUY ENTITY :

PO NO. :

PO LINE NO. :

BLANKET REL. NO. :

-----RECEIVED-----

STATUS :

QUANTITY DELIVERED UOP:

QUANTITY RETURNED UOP:

QUANTITY DELIVERED SKU:

QUANTITY RETURNED SKU:

LAST RECEIPT DATE :

-----INSPECTED-----

DOCK-TO-STOCK PENDING :

QTY ACCEPTED/NOT INSP :

QTY ACCEPTED/INSP :

TOTAL QTY ACCEPTED SKU:

QUANTITY REJECTED :

QTY DUE INVENTORY SKU :

4A0

-----ORDERED-----

UNIT OF PURCHASE :

UNIT PRICE :

QUANTITY ORDERED UOP:

SKU :

SKU CONV. FACTOR :

QUANTITY ORDERED SKU:

STD LOT SIZE QTY :

-----INVOICED-----

STATUS :

CURRENCY CODE :

QUANTITY INVOICED UOP:

AMOUNT INVOICED :

TAX AMOUNT INVOICED :

ADDL COST INVOICED :

LAST INVOICE DATE :

LAST INVOICE PRICE :

07,026

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PS

PO HEADER GENERAL INFORMATION

PHG

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 11/19/2009 14:34:16  
BROWSE: \_

=====

BUY ENTITY :

PO NO. :

PO TYPE :

SERVICE ORDER :

PO PRIORITY :

ORIGINATION CODE :

BUYER ID :

LAST RECEIPT DATE :

LAST INVOICE DATE :

EARLIEST DELIVERY :

EARLIEST FOLLOW-UP:

CURRENCY CODE :

PO STATUS :

DATE ENTERED :

DATE LAST PRINTED :

DATE LAST ACTIVITY:

GL EFFECTIVE DATE :

REPRINT NO. :

CHANGE NOTICE NO. :

SUPPRESS PO PRINT :

OPEN LINES :

CLOSED LINES :

CANCELLED LINES :

UNRESOLVED LINES :

TOTAL LINES :

4A0

07,027

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AP

PURCHASE ORDER TO INVOICE LIST

PIL

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 11/19/2009 14:34:34

=====

BUY ENTITY :

PO NUMBER :

ERS :

CURRENCY CODE:

BLANKET RELEASE NBR: \_\_\_\_\_ PO LINE : 0000

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PO LINE	PAY ENT	VENDOR NUMBER	INVOICE NUMBER	INVOICE DATE	DISTR LINE	EXPENSE AMOUNT	ACT
------------	------------	---------------	-------------------	-----------------	---------------	----------------	-----

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4A0

PAGE: 1 STATUS: END OF LIST

06,015

AP

DOCUMENT PAYMENT GENERAL INFORMATION

DPG

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 11/19/2009 14:34:40  
BROWSE: \_

=====

PAY ENTITY	:		VEND/EMP NBR:	:	
VEND/EMP SHORT NAME:	:		DOCUMENT NBR:	:	
DOCUMENT DATE	:		PAYMENT NBR:	001	PRTL PYMT NBR: 000

	IND	AMOUNT			
SALES TAX/VAT	:		VAT INCLUSIVE	:	
SALES TAX 2	:		EXPENSE IND	:	
SALES TAX 3	:		GL EFFECTIVE DATE:	:	
FREIGHT	:		EXTRACT DATE	:	
ADDITIONAL COST	:		ACCRUAL CANC DATE:	:	
ADV/EXP NBR	:		ADV/EXP DATE	:	
GROSS INVOICE	:		CURRENCY CODE	:	
PAYMENT AMOUNT	:		DISCOUNT TYPE	:	
AMOUNT PAID	:		DISCOUNT TAKEN	:	
	:		PAYMENT STATUS	:	
PAYMENT TERMS	:	PAYMENT REF NBR	:		
PAYMENT DATE	:	PAYMENT TYPE	:		
PAYMENT ROUTE CD	:	HANDLING CODE	:		
FACTOR NUMBER	:	ONE INVC PER PYMT:	:		
REASON CODE/DESC	:	BANK ACCT PYMT CD:	:		

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06,023

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12-201 (Rev. 9-6-2006)

**FBI**

U.S. Department of Justice  
Federal Bureau of Investigation



Purchase Order for Supplies or Services					
1. Date of Order 08/06/2009		2. Order No.		3. Mod. No.	4. Mod. Date
5. To Contractor (Name, Address and Zip Code):		7. Ship to (Consignee and address, Zip Code):			
		FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 2795BA QUANTICO, VA 22135			
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6825, JEH F.B.I. BLDG. WASHINGTON, D. C. 20535		9. Send Invoice to: (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 2795BA QUANTICO, VA 22135			
10. Business Classification OTHER SMALL BUSINESS		11. F.O.B. Point S/P - PRE-PAID		12. Discount Terms NET 30 DAYS	
13. Schedule					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
PLEASE ACKNOWLEDGE ACCEPTANCE OF THE TERMS AND CONDITIONS OF THIS ORDER BY SIGNING AND RETURNING THE ENCLOSED YELLOW COPY WITHIN 10 DAYS TO THE ADDRESS IN BOX # 7. * *					
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and Conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions con- tained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.				15. Grand Total XXXXXXXXXXXX See Instructions on Reverse	
Point of Contact - Purchase Order Information:				16. United States of America. By (Signature)	
Point of Contact - Invoice Payment Status: Commercial Payments Unit [REDACTED]				17. Name (Typed) XXXXXXXXXXXX Title: Contracting Officer	

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C - PROCUREMENT

CREW-2244



**U.S. Department of Justice  
Federal Bureau of Investigation**



Purchase Order for Supplies or Services					
1. Date of Order <b>08/06/2009</b>	2. Order No. [Redacted]	3. Mod. No.	4. Mod. Date	5. Page No. <b>2</b>	
6. To Contractor (Name, Address and Zip Code): [Redacted]			7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 2795BA QUANTICO, VA 22135</b>		
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 4825, JEH F.B.I. BLDG. WASHINGTON, D. C. 20535</b>			9. Send Invoice to: (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 2795BA QUANTICO, VA 22135</b>		
10. Business Classification <b>OTHER SMALL BUSINESS</b>		11. F.O.B. Point <b>S/P - PRE-PAID</b>		12. Discount Terms <b>NET 30 DAYS</b>	
13. Schedule					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>(SIGNATURE)</p> <p>ALL PAYMENTS BY THE GOVERNMENT UNDER THIS ORDER SHALL BE MADE BY ELECTRONIC FUNDS TRANSFER (EFT). THE VENDOR SHALL PROVIDE THIS INFORMATION ON EACH INVOICE OR SUBMIT SF-3881 FORM TO: FBI, COMMERCIAL PAYMENTS UNIT RM. 1987, J. EDGAR HOOVER BLDG 935 PENNSYLVANIA AVENUE, NW WASHINGTON, DC 20535</p> <p>IF THIS INFORMATION IS NOT AVAILABLE TO THE GOVERNMENT, THE INVOICE WILL BE CONSIDERED AN IMPROPER INVOICE AND SHALL BE RETURNED.</p> <p>THIS PURCHASE IS NEGOTIATED UNDER THE AUTHORITY OF: TLE 41, USC 253(C)(1)</p> </div> <div style="width: 45%; text-align: right;"> <p>(DATE)</p> </div> </div>					
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.				15. Grand Total <b>XXXXXXXXXX</b> <i>See Instructions on Reverse</i>	
Point of Contact - Purchase Order Information:			16. United States of America By (Signature)		
Point of Contact - Invoice Payment Status: Commercial Payments Unit - [Redacted]			17. Name (Typed) <b>XXXXXXXXXX</b> Title: Contracting Officer		

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**C - PROCUREMENT**

CREW-2245



**U.S. Department of Justice**  
**Federal Bureau of Investigation**



Purchase Order for Supplies or Services					
1. Date of Order <b>08/06/2009</b>	2. Order No. <div style="border: 1px solid black; height: 15px; width: 100%;"></div>	3. Mod. No.	4. Mod. Date	5. Page No. <b>3</b>	
6. To Contractor (Name, Address and Zip Code): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION</b> <b>ATTN: [REDACTED]</b> <b>BUILDING 27958A</b> <b>QUANTICO, VA 22135</b>		
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION</b> <b>PROCUREMENT SECTION</b> <b>ROOM 4823, JEH F.B.I. BLDG.</b> <b>WASHINGTON, D. C. 20535</b>			9. Send Invoice to: (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION</b> <b>ATTN: [REDACTED]</b> <b>BUILDING 27958A</b> <b>QUANTICO, VA 22135</b>		
10. Business Classification <b>OTHER SMALL BUSINESS</b>		11. FOB/Point <b>S/P - FRE-PAID</b>		12. Discount Terms <b>NET 30 DAYS</b>	
13. Schedule					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
	<p>A PROPER INVOICE SUBMITTED FOR PAYMENT TO THE FBI MUST CONTAIN THE FOLLOWING: THE NAME OF THE VENDOR; AN INVOICE NUMBER; THE CONTRACT OR PURCHASE ORDER NUMBER; THE INVOICE DATE; DESCRIPTION (I.E. NAME OR ITEM LINE NUMBER), PRICE AND QUANTITY OF GOODS OR SERVICES RENDERED; SHIPPING AND/OR PAYMENT TERMS; TAXPAYER ID#; BANKING / ROUTING NUMBER TO ALLOW EFT PAYMENT; CONTACT NAME, TITLE AND TELEPHONE NUMBER AND ANY OTHER SUBSTANTIATING DOCUMENTATION AS REQUIRED BY THE CONTRACT.</p> <p>FAR CLAUSE 52.204-7 AND ITS ALTERNATE 1 - OR, IF A COMMERCIAL ITEM OR SERVICE, ADDENDUM TO 52.212-4, CONTRACT TERMS AND CONDITIONS - COMMERCIAL ITEMS APPLY TO THIS PURCHASE ORDER. THESE CLAUSES REQUIRE THE CONTRACTOR TO BE REGISTERED IN THE CCR DATABASE AND MAINTAIN REGISTRATION UNTIL FINAL PAYMENT.</p> <p>*****FOR FBI INFO ONLY*****</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>				
14. Type of Order <input checked="" type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <b>CONTRACTOR NUMBER</b> <div style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></div>				15. Grand Total <div style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></div> <i>See Instructions on Reverse.</i>	
Point of Contact - Purchase Order Information: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			16. United States By (Sign) <div style="border: 1px solid black; height: 30px; width: 100%;"></div> 17. Name <div style="border: 1px solid black; height: 20px; width: 100%;"></div> Title: Contracting Officer		

**C - PROCUREMENT**

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PO INVOICE MATCHING INFORMATION

PMI

5  
NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_\_\_\_\_ 09/29/2010 10:49:05  
BROWSE: \_\_\_\_\_  
=====

BUY ENTITY :  
PO NO. :  
PO LINE NO. :  
BLANKET REL. NO. :  
CURRENCY CODE :  
PAYMENT BASIS :

VENDOR:

BASE PERMIT TO PAY      INVOICED TO DATE      PERMIT TO PAY

PO HEADER :  
PO HEADER TAX/VAT :  
PO HEADER ADDL COST :  
BLANKET :  
BLANKET TAX/VAT :  
BLANKET ADDL COST :  
PO LINE :  
PO LINE TAX/VAT :  
PO LINE ADDL COST :

09,024

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ORIGINAL

CREW-2253



**FBI**

**U.S. Department of Justice  
Federal Bureau of Investigation**



<b>Purchase Order for Supplies or Services</b>					
IMPORTANT: Mark all packages and papers with contract and/or order numbers					
1. Date of Order <b>02/10/2010</b>	2. Order No. <div style="border: 1px solid black; height: 15px; width: 100%;"></div>	3. Mod. No.	4. Mod. Date	5. Page No. <b>2</b>	
6. To Contractor (Name, Address and Zip Code): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: <div style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></div> BUILDING 27750A QUANTICO, VA 22135</b>		
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 4023, JED F.B.I. BLDG. WASHINGTON, D. C. 20535</b>			9. Send invoice to (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: <div style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></div> BUILDING 27750A QUANTICO, VA 22135</b>		
10. Business Classification		11. F.O.B. Point <b>Q/P - PRE-PAID</b>		12. Discount Terms <b>NET 30 DAYS</b>	
13. Schedule					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.				15. Grand Total <div style="border: 1px solid black; width: 100px; height: 20px; text-align: center; font-size: small;">XXXXXXXXXX</div> <b>See Instructions on Reverse</b>	
Point of Contact - Purchase Order information:			16. United States of America By (Signature)		
Point of Contact - Invoice Payment Status: Commercial Payments Unit - ( <div style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></div> )			17. Name (Typed) <b>XXXXXXXXXX</b>  Title: Contracting Officer		

ORIGINAL 

CREW-2254

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**FBI**U.S. Department of Justice  
Federal Bureau of Investigation**Purchase Order for Supplies or Services**

IMPORTANT: Mark all packages and papers with contract and/or order numbers

1. Date of Order 02/16/2010	2. Order No. [REDACTED]	3. Mod. No.	4. Mod. Date	5. Page No. 3
6. To Contractor (Name, Address and Zip Code): [REDACTED]		7. Ship to (Consignee and address, Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 27950A QUANTICO, VA 22130		
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6023, JTH F.B.I. BLDG. WASHINGTON, D. C. 20535		9. Send Invoice to: (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 27950A QUANTICO, VA 22130		
10. Business Classification		11. F.O.B. Point G/P - PRE-PAID		12. Discount Terms NET 30 DAYS
13. Schedule				
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)
				Amount (F)
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.			15. Grand Total XXXXXXXXXX See instructions on Reverse	
Point of Contact - Purchase Order Information:			16. United States of America By (Signature)	
Point of Contact - Invoice Payment Status: Commercial Payments Unit [REDACTED]			17. Name (Typed) XXXXXXXXXX Title: Contracting Officer	

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**U.S. Department of Justice  
Federal Bureau of Investigation**



<b>Purchase Order for Supplies or Services</b>					
IMPORTANT: Mark all packages and papers with contract and/or order numbers					
1. Date of Order <b>02/10/2010</b>	2. Order No. [REDACTED]	3. Mod. No.	4. Mod. Date	5. Page No. <b>1</b>	
6. To Contractor (Name, Address and Zip Code) [REDACTED]			7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 27950A QUANTICO, VA 22135</b>		
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 4023, JEN P.B.I. BLDG. WASHINGTON, D. C. 20535</b>			9. Send invoice to: (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 27950A QUANTICO, VA 22135</b>		
10. Business Classification		11. P.O.B. Point <b>O/P - PRE-PAID</b>		12. Discount Terms <b>NET 30 DAYS</b>	
<b>13. Schedule</b>					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
14. Type of Order <input checked="" type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.				16. Grand Total <b>XXXXXXXXXX</b> <b>See Instructions on Reverse</b>	
Point of Contact - Purchase Order Information:			15. United States of America By (Signature)		
Point of Contact - Invoice Payment Status: Commercial Payments Unit [REDACTED]			17. Name (Typed) <b>XXXXXXXXXX</b> Title: Contracting Officer		

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CREW-2256

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**U.S. Department of Justice  
Federal Bureau of Investigation**



<b>Purchase Order for Supplies or Services</b>					
IMPORTANT: Mark all packages and papers with contract and/or order numbers					
1. Date of Order <b>02/10/2010</b>	2. Order No. [Redacted]	3. Mod. No.	4. Mod. Date	5. Page No. 1	
6. To Contractor (Name, Address and Zip Code): [Redacted]			7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 2799DA QUANTICO, VA 22135</b>		
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 4023, JHM F.B.I. BLDG. WASHINGTON, D. C. 20535</b>			9. Send invoice to: (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 2799DA QUANTICO, VA 22135</b>		
10. Business Classification		11. F.O.B. Point <b>3/P - PRE-PAID</b>		12. Discount Terms <b>NET 30 DAYS</b>	
<b>13. Schedule</b>					
Line No. (A)	Supply or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
	<b>MARK ALL PACKAGES, [Redacted]</b>  <b>RESTRICTED DELIVERY, MON-FRI, 9A-4P, NO HOLIDAYS.</b>  <b>THIS PURCHASE IS NEGOTIATED UNDER THE AUTHORITY OF</b> <b>THE 41, USC 253(C)(1)</b>  <b>*****FOR FRT INFO ONLY*****</b> <b>[Redacted]</b>				
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <b>CONTRACTOR NUMBER [Redacted]</b>			<input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.  <div style="float: right; text-align: right;"> <b>15. Grand Total</b>   <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> </div>		
Point of Contact - Purchase Order Information: [Redacted]		16. United States of America By (Signature)  17. Name (Print)  Title:			

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PS

REQUISITION HEADER

RQH

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

02/16/2010 10:03:10

REQUEST: g\_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

=====

BUY ENTITY	:	
REQUISITION NO.	:	
REQUESTER ID	:	
REQUISITION TOTAL	:	
REQUISITION LINE TOTAL:	:	
DIFFERENCE	:	
BUYER ID	:	
REQUISITION STATUS	:	
GL EFFECTIVE DATE	:	
DATE ENTERED	:	
DATE LAST UPDATED	:	
SIGNATURE APPROVAL	:	
UNRESOLVED LINES	:	0
OPEN LINES	:	14
PARTIALLY CLOSED LINES:	:	0
CLOSED LINES	:	0
TOTAL LINES	:	14

RECEIVED  
FEB 16 2010

BY \_\_\_\_\_

NOTES: ENTERED 1/12/10 BY \_\_\_\_\_ UNMANNED AERIAL SYSTEMS <ASAPU RECD FROM  
PS FO 2/2 FOR REASSIGNMENT TO QCU FWD TO QCU 2/2 \_\_\_\_\_ RCVD QCU 2/16  
4A0 07,048

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PS

REQUISITION HEADER

RQH

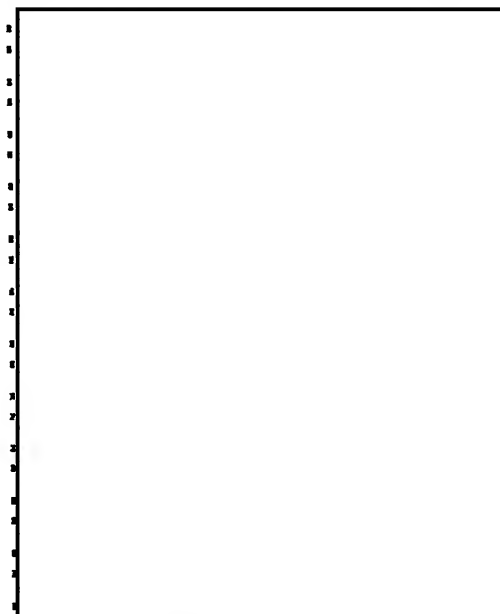
NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

02/02/2010 12:50:29

REQUEST: G\_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

=====

BUY ENTITY	:	
REQUISITION NO.	:	
REQUESTER ID	:	
REQUISITION TOTAL	:	
REQUISITION LINE TOTAL	:	
DIFFERENCE	:	
BUYER ID	:	
REQUISITION STATUS	:	
GL EFFECTIVE DATE	:	
DATE ENTERED	:	
DATE LAST UPDATED	:	
SIGNATURE APPROVAL	:	
UNRESOLVED LINES	:	0
OPEN LINES	:	14
PARTIALLY CLOSED LINES:	:	0
CLOSED LINES	:	0
TOTAL LINES	:	14



NOTES: ENTERED 1/12/10 BY  UNMANNED AERIAL SYSTEMS <ASAPU RECD FROM  
PS FO 2/2 FOR REASSIGNMENT TO QCU, FRWD TO QCU 2/2>

4A0

07,048

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TRU  
Unit

☒ ROUTINE      ☐ PRIORITY      ☐ EXPEDITE

SRU ROUTING SLIP

<input checked="" type="checkbox"/> FY10	<input type="checkbox"/> FY09-10	<input type="checkbox"/> CNST	<input type="checkbox"/> NY	<input type="checkbox"/>
--	----------------------------------	-------------------------------	-----------------------------	--------------------------

*Funds Approval*

1/5/10

- ☐ TRIAD
- ☐ PURCHASE CARD
- ☐ REIMBURSABLE

REQ. #

b7E

*Final Review*

*Commit/Copy/File*

1/12/10

*Send to:*

- ☐
- ☐
- ☐

- ☐

CD-5B, FBIHQ Rm 9904)

- ☐

Investment Management Unit, 616 H. St. NW, Suite 703, Gallery Place) IT Acquisitions

~~Acquisition Strategy and Planning Unit (3BIHQ Rm 6865)~~  
~~PLEASE SEND TO INDIVIDUAL MARKED BELOW WHEN FINISHED~~

☒

- ☐
- ☐
- ☐
- ☐
- ☐

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Rev. 11-18-09

REQUISITION #

☒ Routine  
☐ Priority  
☐ Expedite

**REQUISITION (FD-369) COVER SHEET**  
**OPERATIONAL TECHNOLOGY DIVISION (OTD)**

Entered in PAMS by:

REQUIRED 1. ☒ **REQUIRED DOCUMENTATION** (See Acquisition Documentation Guideline)

☐ Acquisition Plan FD-911 (Required for acquisitions  $\geq$  \$5M system life cost)  
☐ EC (Required for all acquisitions  $\geq$  \$100K, except contract renewals)  
☐ Independent Government Cost Estimate  
☐ Market Research  
☒ Sole Source Justification  
☒ Statement of Work (SOW) or Statement of Need (SON)  
☐ Source Selection Plan (Required for competitive acquisitions  $\geq$  \$100K)  
☒ Acquisition Security Checklist  
☒ Acquisition Security Request (ASR)  
☐ DD Form 254 (Required for classified contracts)  
☐ Section 508 (Required for electronic and IT acquisitions)

Additional Requirements for IT Acquisitions Only

☐ COTS Approval (Required for IT non-baseline acquisitions)  
☐ IT Acquisition Form (Required for requisitions  $>$  \$25K)

REQUIRED 2. ☒ **UNIT CHIEF APPROVAL**

UC

Printed Name

initial

3. ☐ **TMSU APPROVAL**

Printed Name

initial

TMSU Review Criteria (If the Answer to any of below questions is YES, Requisition MUST be submitted to TMSU)		YES	NO
Is the request $\geq$ \$5M (TMSU will assist in preparing for Acquisition Review Board)?			x
Is request to fund a Service Contract (New Contract _____ or Existing Contract _____)?			
If funding an existing contract option or mod identify the Contract # _____			x
Is request to fund an Activity or Project (New _____ or Existing _____)?			
If an existing Activity or Project reported in PAMS, identify PAMS ID # _____			x

4. ☐  **$>$  \$100,000 - Section Chief**

Printed Name

initial

5. ☐  **$>$  \$250,000 - Deputy Assistant Director**

initial

6. ☐  **$>$  \$1,000,000 - Assistant Director**

initial

7. ☐ **REQUISITION WITH ECs ATTACHED:**

\_\_\_\_\_ for uploading or alternate

Printed Name

initial

REQUIRED 8. ☒ **SRU - FUNDING APPROVAL & TRANSMITTAL to CONTRACTING**

DTP: All Accounts

initial

TFS&S: Equipment, Supplies

x

initial

Cyber, 3G, TRIAD

initial

TFS&S: Services, Training

initial

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CREW-2277



# Acquisition Security Unit Checklist

Version 3 - 10/01/2009

Previous editions are obsolete and will not be accepted

2010-1562

MUST BE COMPLETED BY REQUESTOR	
Request Date:	JAN - 5 - 2010
Anticipated Procurement Date:	FEB - 5 - 2010
Requisition #:	
Point of Contact:	
POC Phone #:	
Highest Classification Required for Vendor to Provide Services / Products: (Access to FBI systems? Access to classified information?) <input type="checkbox"/> UNCLASSIFIED <input type="checkbox"/> SECRET <input type="checkbox"/> TOP SECRET <input type="checkbox"/> TOP SECRET/SCI	
Comments:	
ASU: USE ONLY:	
Date Received: 01/25/10	ASU POC:
Date Additional Information Requested: _____	<input type="checkbox"/>
Date Returned: _____	<input checked="" type="checkbox"/>
<input type="checkbox"/> Classified Contract (DD 254 Required) <input type="checkbox"/> Community Acquisition Risk Section (CARS) Special Security Requirement (CARS Assessment Required) <input type="checkbox"/> Contracting Officer's Security Representative <input type="checkbox"/> E-QIP Special Security Requirements <input type="checkbox"/> DOJ Procurement Guidance for Security Systems and Data, including Personally Identifiable Information (PII) Special Security Requirements <input type="checkbox"/> DOJ Consent for Warrantless Searches of DOJ Workplaces <input type="checkbox"/> Personnel Security Special Security Requirements <input type="checkbox"/> Source Selection Evaluation Board (SSEB) Requirements for Classified Contracts Special Security Requirements <input type="checkbox"/> Contractor Financial Disclosure Requirements <input type="checkbox"/> Contractor Suitability Requirements <input type="checkbox"/> National Interest Determination	
ASU: SPECIAL NOTES:	
<input type="checkbox"/> Required if not already accomplished as part of the original contract award <input type="checkbox"/> Required if connected to a FISMA or Critical Asset System (i.e. _____) <input type="checkbox"/> Required if includes procurement of IT hardware / software connected to a FISMA or Critical Asset System <input type="checkbox"/> Intergovernmental procurement / reimbursement <input checked="" type="checkbox"/> No actions related to security were identified in the documentation provided <input type="checkbox"/>	
_____ ASU 01/25/10 Date	
ACKNOWLEDGEMENT:	
Procurement Official/COTR/Technical Representative: <input checked="" type="checkbox"/> I certify that those security requirements identified above by the ASU have been incorporated into the procurement documentation. <input checked="" type="checkbox"/> This <input checked="" type="checkbox"/> is / <input type="checkbox"/> is not a confidential contract. Signature: _____ Printed Name: _____ Date: 08 Jan 2010	

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Please attach the completed checklist to your package at submission to Finance.

CREW-2280

# ACQUISITION SECURITY REQUEST

Request Date: 1/5/10	Anticipated Procurement Date: 2/5/10
<b>VENDOR INFORMATION</b>	
<input type="checkbox"/> Reseller With Access to FBI Facilities <input type="checkbox"/> Reseller With <u>No</u> Access to FBI Facilities	
Vendor Name:	
Vendor Address:	
<input checked="" type="checkbox"/> Manufacturer	<input checked="" type="checkbox"/> Hardware <input type="checkbox"/> Software <input type="checkbox"/> Maintenance
Vendor Name:	
Vendor Address:	
<input type="checkbox"/> Contractor Providing Classified Services <input type="checkbox"/> DD Form 254 Required	
Vendor Name:	
Vendor Address:	
<b>PRODUCT/SERVICES INFORMATION</b>	
<input type="checkbox"/> FISMA System <input type="checkbox"/> Critical Asset System <input type="checkbox"/> Telecommunications <input type="checkbox"/> Audiovisual	
1. Products being procured (list the specific hardware / software / services in detail)	
2. What entity will be purchasing and using the product (Location, Division, Section, Unit, and Program)?	Operational Technology Division Traditional Technology Section/Technical Response Unit (TRU) ERF Building 27958A Quantico, VA 22135  Unmanned Aerial Vehicle/System program
3. Network on which product/service is to be used (i.e. [redacted] etc.)	
4. Highest Classification / Security Requirements (i.e. Top Secret, Top Secret SCI, Secret, SBU, LES, etc.)	UNCLAS/LES
5. Who is installing and maintaining the equipment/software (FBI personnel, vendor, other)?	FBI personnel assigned to TRU will be maintaining and installing this equipment.
6. Will the vendor require access to classified information/systems?	N/A
<b>PROCUREMENT INFORMATION</b>	
Contracting Officer Name/ Phone:	
FBI COTR Name/Phone:	
Program Manager/Technical POC:	
Requisition Number:	
Purchase Order Number:	
Contract Number:	
<b>DOCUMENTATION ATTACHED</b>	

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## CQUISITION SECURITY REQUEST

- |   |
|---|
| <input type="checkbox"/> Answers to the Acquisition Risk Questions (the replacement for the SF-328) |
| <input type="checkbox"/> Key Management Personnel Listing (KMPL)                                    |
| <input type="checkbox"/> FD-369 Requisition for Supplies and/or Equipment                           |
| <input type="checkbox"/> Statement of Work (SOW) – Required if a classified contract                |

### PRIORITY

All requests will be handled by date received by ASU unless specific issues affecting the priority, i.e. Director's Priority, are specifically provided in writing by the Contracting Officer.

Comments:

**FBI**

**U.S. Department of Justice  
Federal Bureau of Investigation**



<b>Purchase Order for Supplies or Services</b>					
IMPORTANT: Mark all packages and papers with contract and/or order numbers					
1. Date of Order <b>02/10/2010</b>	2. Order No. [Redacted]	3. Mod. No.	4. Mod. Date	5. Page No. <b>1</b>	
6. To Contractor (Name, Address and Zip Code): [Redacted]			7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27000A QUANTICO, VA 22135</b>		
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6032, JEN F.B.I. BLDG. WASHINGTON, D. C. 20535</b>			9. Send invoice to: (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27000A QUANTICO, VA 22135</b>		
10. Business Classification		11. F.O.B. Point <b>3/P - PRE-PAID</b>		12. Discount Terms <b>NET 30 DAYS</b>	
13. Schedule					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.				15. Grand Total <b>XXXXXXXXXX</b> <i>See Instructions on Reverse</i>	
Point of Contact - Purchase Order Information:				16. United States of America By (Signature)	
Point of Contact - Invoice Payment Status: Commercial Payments Unit [Redacted]				17. Name (Typed) [Redacted] Title: Contracting Officer	

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**U.S. Department of Justice  
Federal Bureau of Investigation**



<b>Purchase Order for Supplies or Services</b>					
IMPORTANT: Mark all packages and papers with contract and/or order numbers					
1. Date of Order <b>02/10/2010</b>	2. Order No. <div style="border: 1px solid black; width: 100px; height: 20px;"></div>	3. Mod. No.	4. Mod. Date	5. Page No. <b>1</b>	
6. To Contractor (Name, Address and Zip Code): <div style="border: 1px solid black; width: 280px; height: 40px;"></div>			7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: <div style="border: 1px solid black; width: 100px; height: 15px;"></div> BUILDING 27500A QUANTICO, VA 22135</b>		
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 4035, JPM F.B.I. BLDG. WASHINGTON, D. C. 20535</b>			9. Send Invoices to: (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: <div style="border: 1px solid black; width: 100px; height: 15px;"></div> BUILDING 27500A QUANTICO, VA 22135</b>		
10. Business Classification		11. F.O.B. Point <b>SHIP TO: QUANTICO</b>		12. Discount Terms <b>NET 30 DAYS</b>	
<b>13. Schedule</b>					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only or the form and is issued subject to the terms and conditions of the above-numbered contract.				15. Grand Total <b>XXXXXXXXXX</b> <b>See Instructions on Reverse</b>	
Point of Contact - Purchase Order Information:			16. United States of America By (Signature)		
Point of Contact - Invoice Payment Status: Commercial Payments Unit - <div style="border: 1px solid black; width: 60px; height: 15px;"></div>			17. Name (Type): <b>XXXXXXXXXX</b> Title: Contracting Officer		

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**FBI**U.S. Department of Justice  
Federal Bureau of Investigation

Purchase Order for Supplies or Services					
IMPORTANT: Mark all packages and papers with contract and/or order numbers					
1. Date of Order 02/10/2010	2. Order No.	3. Mod. No.	4. Mod. Date	5. Page No. 1	
6. To Complainant (Name, Address and Zip Code)		7. Ship to (Consignee and Address, Zip Code)			
		FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 2700A QUANTICO, VA 22135			
8. Issuing Office (Address correspondence to)		9. Send Invoices to: (Name, Address and Zip Code)			
FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 4023, JEN F.B.I. BLDG. WASHINGTON, D. C. 20535		FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 2700A QUANTICO, VA 22135			
10. Business Classification		11. F.O.B. Point B/P - PREPAID		12. Discount Terms NET 30 DAYS	
13. Schedule					
Line No. (A)	Supplier or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
14. Type of Order			15. Grand Total		
<input checked="" type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated.			<input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.		
			XXXXXXXXXXXX See Instructions on Reverse		
Point of Contact - Purchase Order Information:			16. United States of America By (Signature)		
Point of Contact - Invoice Payment Status: Commercial Payments [REDACTED]			17. Name (Typed) XXXXXXXXXX Title: Contracting Officer		

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**U.S. Department of Justice  
Federal Bureau of Investigation**



Purchase Order for Supplies or Services					
IMPORTANT: Mark all packages and papers with contract and/or order numbers					
1. Date of Order <b>02/10/2010</b>	2. Order No. <div style="border: 1px solid black; height: 15px; width: 100%;"></div>	3. Mod. No.	4. Mod. Date	5. Page No. <b>1</b>	
6. To Contractor (Name, Address and Zip Code) <div style="border: 1px solid black; height: 40px; width: 100%;"></div>		7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: <div style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></div> BUILDING 2770A QUANTICO, VA 22135</b>			
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 4023, VEN F.B.I. BLDG. WASHINGTON, D. C. 20535</b>		9. Send Invoice to: (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: <div style="border: 1px solid black; display: inline-block; width: 100px; height: 15px;"></div> BUILDING 2770A QUANTICO, VA 22135</b>			
10. Business Classification		11. F.O.B. Point <b>O/P - PRE-PAID</b>		12. Discount Terms <b>NET 30 DAYS</b>	
13. Schedule					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
14. Type of Order <input checked="" type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.		15. Grand Total <div style="border: 1px solid black; width: 100%; height: 20px; text-align: center; font-weight: bold;">XXXXXXXXXX</div> <b>See Instructions on Reverse</b>			
Point of Contact - Purchase Order Information:		16. United States of America By (Signature)			
Point of Contact - Invoice Payment Status: Commercial Payments Unit <div style="border: 1px solid black; display: inline-block; width: 80px; height: 15px;"></div>		17. Name (Typed) <div style="border: 1px solid black; display: inline-block; width: 100%; height: 15px;"></div> Title: Contracting Officer			

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**U.S. Department of Justice  
Federal Bureau of Investigation**



<b>Purchase Order for Supplies or Services</b>					
IMPORTANT: Mark all packages and papers with contract and/or order numbers					
1. Date of Order <b>02/10/2010</b>	2. Order No. [Redacted]	3. Mod. No. [Redacted]	4. Mod. Date [Redacted]	5. Page No. 3	
6. To Contractor (Name, Address and Zip Code): [Redacted]			7. Ship to (Consignee and address, Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27950A QUANTICO, VA 22135</b>		
8. Issuing Office (Address correspondence to): <b>FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 4823, JHM P.B.I. BLDG. WASHINGTON, D. C. 20535</b>			9. Send Invoices to: (Name, Address and Zip Code): <b>FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27950A QUANTICO, VA 22135</b>		
10. Business Classification		11. F.O.B. Point <b>O/P - PRE-PAID</b>		12. Discount Terms <b>NET 30 DAYS</b>	
13. Schedule					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
	<b>MARK ALL PACKAGES, [Redacted]</b>  <b>RESTRICTED DELIVERY, MON-FRI, 9A-4P, NO HOLIDAYS,</b>  <b>THIS PURCHASE IS NEGOTIATED UNDER THE AUTHORITY OF:</b> <b>FILE #1, USC 253(C)(1)</b>  <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 10px;"></div>				
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <b>CONTRACTOR NUMBER</b> [Redacted] <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.				15. Grand Total <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"></div>	on Reverse <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"></div>
16. United States of America By (Signature) [Redacted]			17. Name (Type) [Redacted]		
Point of Contact - Purchase Order Information: [Redacted]			Title: Contact [Redacted]		

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## PO INVOICE MATCHING INFORMATION

PMI

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 03/10/2011 15:56:36  
BROWSE: \_

BUY ENTITY  
PO NO.  
PO LINE NO.  
BLANKET REL. NO.  
CURRENCY CODE  
PAYMENT BASIS

VENDOR:

BASE PERMIT TO PAY	INVOICED TO DATE	PERMIT TO PAY
--------------------	------------------	---------------

```
PO HEADER :
PO HEADER TAX/VAT :
PO HEADER ADDL COST :
BLANKET :
BLANKET TAX/VAT :
BLANKET ADDL COST :
PO LINE :
PO LINE TAX/VAT :
PO LINE ADDL COST :
```

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Purchase Report	
Requisition #:	
ASAPU Acceptance Date:	4/28
ASAPU Assignment Date:	7/12
Unit Chief Assignment Date:	7/20
Contract Specialist:	
Requiring Division:	D 18
Item/Service:	
Purchase Order Information	
PO Number:	
PO Sign/Award Date:	
RDD/EDD	
Total Purchase Price	
Special Notes:	

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S. Dr Comp  
PR Rpt Comp

1153 7/22 [ ] will get [ ]  
Sally added. cl will wk up [ ]  
for this new type  
1045 8/3 [ ] said to would get the  
Sally add  
for

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REQUISITION HEADER

RQH

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_  
REQUEST: G \_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

RECEIVED  
JUL 20 2010

07/12/2010 07:38:14

BY: [REDACTED]

BUY ENTITY  
REQUISITION NO.  
REQUESTER ID  
REQUISITION TOTAL  
REQUISITION LINE TOTAL  
DIFFERENCE  
BUYER ID  
REQUISITION STATUS  
GL EFFECTIVE DATE  
DATE ENTERED  
DATE LAST UPDATED  
SIGNATURE APPROVAL  
UNRESOLVED LINES  
OPEN LINES  
PARTIALLY CLOSED LINES  
CLOSED LINES  
TOTAL LINES

[REDACTED]

0  
2  
0  
0  
2

NOTES: ENTERED 4/24/10 BY [REDACTED] SENT TO ASAPU/ [REDACTED]

[REDACTED] <ASAPU RECD 4/28, FRWD TO QCU 7/12>

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REQUISITION LINE

RQ1

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

07/12/2010 07:38:19

REQUEST: G\_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

=====

BUY ENTITY :

REQ. LINE NO. :

BUYER ID :

CATALOG NO. :

ITEM DESCRIPTION :

QUANTITY REQUIRED SKU :

UNIT PRICE :

REQUIRED DATE :

GL EFFECTIVE DATE :

REQUISITION NO. :

REQUESTER ID :

PRIORITY :

ITEM NO. :

SKU :

PRICE TYPE :

SHIP TO CODE :

PREFERRED VENDOR/QUOTE

PAY ENTITY :

QUOTE NUMBER :

GL COMPANY :

GL CENTER :

PROJECT CO. :

VENDOR NO :

OR SHORT NAME :

ITEM SEQ NO. :

GL ACCOUNT :

DISTRIB IND :

PROJECT CODE :

GROUP NUMBER :

QUOTE REQUIRED : N

ACCOUNTING RULE: 01

DSP DEFAULTS : \_ PASS : \_

CONT TO RQ2 : \_

LINE STATUS : 2

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REQUISITION LINE

RQ1

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

07/12/2010 07:38:19

REQUEST: G \_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

BUY ENTITY

REQ. LINE NO.

BUYER ID

CATALOG NO.

ITEM DESCRIPTION

QUANTITY REQUIRED SKU

UNIT PRICE

REQUIRED DATE

GL EFFECTIVE DATE

REQUISITION NO.

REQUESTER ID

PRIORITY

ITEM NO.

SKU

PRICE TYPE

SHIP TO CODE

PREFERRED VENDOR/QUOTE

PAY ENTITY

VENDOR NO

OR SHORT NAME

ITEM SEQ NO.

GROUP NUMBER

QUOTE NUMBER

QUOTE REQUIRED : N

GL COMPANY

GL CENTER

PROJECT CO.

GL ACCOUNT

DISTRIB IND

PROJECT CODE

ACCOUNTING RULE: 01

DSP DEFAULTS : \_ PASS : \_

CONT TO RQ2 : \_

LINE STATUS : 2

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VSC  
Unit

REQ. #

SRU ROUTING SLIP

<input checked="" type="checkbox"/> FY10	<input type="checkbox"/> FY10-R	<input type="checkbox"/> NY	<input type="checkbox"/>	<input type="checkbox"/>
--	---------------------------------	-----------------------------	--------------------------	--------------------------

*Funds Approval*

- ☐ TRIAD
- ☐ PURCHASE CARD
- ☐ REIMBURSABLE

*Final Review*

☒

*Commit/Copy/File*

☒

4/26/10

*Send to:*

- ☐
- ☐
- ☐

☐ IT Acquisitions - c/o OTD/AMU, Room A146

☒ Acquisition Strategy and Planning Unit (EBHQ, Rm. 6869)

**PLEASE SEND TO INDIVIDUAL MARKED BELOW WHEN FINISHED**

☒

- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐

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Rev. 11-18-09	<b>REQUISITION (FD-369) COVER SHEET</b> <b>OPERATIONAL TECHNOLOGY DIVISION (OTD)</b>	REQUISITION # <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Entered in PAMS by: <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div> <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div>																		
<div style="display: flex; justify-content: space-between;"><div style="width: 15%;"><div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div> Routine <div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div> Priority <div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"><input checked="" type="checkbox"/></div> Expedite</div><div style="width: 85%;"></div></div>																					
<b>REQUIRED 1. <input checked="" type="checkbox"/> REQUIRED DOCUMENTATION</b> (See Acquisition Documentation Guideline)																					
<div style="display: flex;"><div style="width: 10%; text-align: center;"><div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div><div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"><input checked="" type="checkbox"/></div><div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div><div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"><input checked="" type="checkbox"/></div><div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div><div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"><input checked="" type="checkbox"/></div><div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"><input checked="" type="checkbox"/></div><div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div><div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div></div><div style="width: 90%;"><p>Acquisition Plan FD-911 (Required for acquisitions ≥\$5M system life cost)</p><p>EC (Required for all acquisitions ≥ \$100K, except contract renewals)</p><p>Independent Government Cost Estimate</p><p>Market Research</p><p>Sole Source Justification</p><p>Statement of Work (SOW) or Statement of Need (SON)</p><p>Source Selection Plan (Required for competitive acquisitions ≥\$100K)</p><p>Acquisition Security Checklist</p><p>Acquisition Security Request (ASR)</p><p>DD Form 254 (Required for classified contracts)</p><p>Section 508 (Required for electronic and IT acquisitions)</p></div></div>																					
<div style="display: flex; justify-content: space-between;"><div style="width: 40%;"><p><u>Additional Requirements for IT Acquisitions Only</u></p><div style="border: 1px solid black; width: 20px; height: 20px; margin-bottom: 2px;"></div> COTS Approval (Required for IT non-baseline acquisitions)</div><div style="width: 60%;"></div></div>																					
<div style="display: flex; justify-content: space-between;"><div style="width: 40%;"><p><b>REQUIRED 2. <input checked="" type="checkbox"/> UNIT CHIEF APPROVAL</b></p><div style="border: 1px solid black; width: 150px; height: 20px; margin: 5px 0;"></div><p style="text-align: center; font-size: small;">Printed Name</p></div><div style="width: 60%; text-align: right;"><div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px 0;"></div><p style="text-align: center; font-size: small;">initial</p></div></div>																					
<div style="display: flex; justify-content: space-between;"><div style="width: 40%;"><p><b>3. <input type="checkbox"/> TMSU APPROVAL</b></p><div style="border: 1px solid black; width: 150px; height: 20px; margin: 5px 0;"></div><p style="text-align: center; font-size: small;">Printed Name</p></div><div style="width: 60%; text-align: right;"><div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px 0;"></div><p style="text-align: center; font-size: small;">initial</p></div></div>																					
<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 70%;">TMSU Review Criteria <small>(If the Answer to any of below questions is YES, Requisition MUST be submitted to TMSU)</small></th><th style="width: 10%;">YES</th><th style="width: 20%;">NO</th></tr></thead><tbody><tr><td>Is the request ≥ \$5M (TMSU will assist in preparing for Acquisition Review Board)?</td><td></td><td></td></tr><tr><td>Is request to fund a Service Contract (New Contract _____ or Existing Contract _____)?</td><td></td><td></td></tr><tr><td>If funding an existing contract option or mod identify the Contract # _____</td><td></td><td></td></tr><tr><td>Is request to fund an Activity or Project (New _____ or Existing _____)?</td><td></td><td></td></tr><tr><td>If an existing Activity or Project reported in PAMS, identify PAMS ID # _____</td><td></td><td></td></tr></tbody></table>				TMSU Review Criteria <small>(If the Answer to any of below questions is YES, Requisition MUST be submitted to TMSU)</small>	YES	NO	Is the request ≥ \$5M (TMSU will assist in preparing for Acquisition Review Board)?			Is request to fund a Service Contract (New Contract _____ or Existing Contract _____)?			If funding an existing contract option or mod identify the Contract # _____			Is request to fund an Activity or Project (New _____ or Existing _____)?			If an existing Activity or Project reported in PAMS, identify PAMS ID # _____		
TMSU Review Criteria <small>(If the Answer to any of below questions is YES, Requisition MUST be submitted to TMSU)</small>	YES	NO																			
Is the request ≥ \$5M (TMSU will assist in preparing for Acquisition Review Board)?																					
Is request to fund a Service Contract (New Contract _____ or Existing Contract _____)?																					
If funding an existing contract option or mod identify the Contract # _____																					
Is request to fund an Activity or Project (New _____ or Existing _____)?																					
If an existing Activity or Project reported in PAMS, identify PAMS ID # _____																					
<div style="display: flex; justify-content: space-between;"><div style="width: 40%;"><p><b>4. <input checked="" type="checkbox"/> &gt; \$100,000 - Section Chief</b></p><div style="border: 1px solid black; width: 150px; height: 20px; margin: 5px 0;"></div><p style="text-align: center; font-size: small;">Printed Name</p></div><div style="width: 60%; text-align: right;"><div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px 0;"></div><p style="text-align: center; font-size: small;">initial</p></div></div>																					
<div style="display: flex; justify-content: space-between;"><div style="width: 40%;"><p><b>5. <input checked="" type="checkbox"/> &gt; \$250,000 - Deputy Assistant Director</b></p><div style="border: 1px solid black; width: 150px; height: 20px; margin: 5px 0;"></div></div><div style="width: 60%; text-align: right;"><div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px 0;"></div><p style="text-align: center; font-size: small;">initial</p></div></div>																					
<div style="display: flex; justify-content: space-between;"><div style="width: 40%;"><p><b>6. <input type="checkbox"/> &gt; \$1,000,000 - Assistant Director</b></p><div style="border: 1px solid black; width: 150px; height: 20px; margin: 5px 0;"></div></div><div style="width: 60%; text-align: right;"><div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px 0;"></div><p style="text-align: center; font-size: small;">initial</p></div></div>																					
<div style="display: flex; justify-content: space-between;"><div style="width: 40%;"><p><b>7. <input checked="" type="checkbox"/> REQUISITION WITH ECs ATTACHED:</b></p><div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div><p style="text-align: center; font-size: small;">for uploading or alternate</p></div><div style="width: 60%; text-align: right;"><p style="margin: 0;">APR 20 2010</p><div style="border: 1px solid black; width: 40px; height: 20px; margin: 5px 0;"></div><p style="text-align: center; font-size: small;">initial</p></div></div>																					
<div style="display: flex; justify-content: space-between;"><div style="width: 40%;"><p><b>REQUIRED 8. <input checked="" type="checkbox"/> SRU - FUNDING APPROVAL &amp; TRANSMITTAL to CONTRACTING</b></p><div style="display: flex; justify-content: space-between; margin-top: 10px;"><div style="width: 45%;"><p>DTP: All Accounts <span style="float: right;">initial</span></p><div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div><p>Cyber, 3G, TRIAD <span style="float: right;">initial</span></p><div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div></div><div style="width: 45%;"><p>TFS&amp;S: Equipment, Supplies <span style="float: right;">initial</span></p><div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div><p>TFS&amp;S: Services, Training <span style="float: right;">initial</span></p><div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div></div></div></div></div>																					

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# QUISITION SECURITY REQUEST

Request Date: 04/15/2010	Anticipated Procurement Date:
<b>VENDOR INFORMATION</b>	
<input type="checkbox"/> Reseller With Access to FBI Facilities <input type="checkbox"/> Reseller With <u>No</u> Access to FBI Facilities	
Vendor Name:	
Vendor Address:	
<input checked="" type="checkbox"/> <b>Manufacturer</b> <input checked="" type="checkbox"/> <b>Hardware</b> <input type="checkbox"/> <b>Software</b> <input type="checkbox"/> <b>Maintenance</b>	
Vendor Name:	
Vendor Address:	
<input type="checkbox"/> <b>Contractor Providing Classified Services</b> <input type="checkbox"/> <b>DD Form 254 Required</b>	
Vendor Name:	
Vendor Address:	
<b>PRODUCT/SERVICES INFORMATION</b>	
<input type="checkbox"/> <b>FISMA System</b> <input checked="" type="checkbox"/> <b>Critical Asset System</b> <input type="checkbox"/> <b>Telecommunications</b> <input type="checkbox"/> <b>Audiovisual</b>	
1. Products being procured (list the specific hardware / software / services in detail)	
2. What entity will be purchasing and using the product (Location, Division, Section, Unit, and Program)?	Operational Technology Division, Traditional Technology Section, Video Surveillance Unit, Airborne Surveillance
3. Network on which product/service is to be used (i.e. etc.)	N/A
4. Highest Classification / Security Requirements (i.e. Top Secret, Top Secret SCI, Secret, SBU, LES, etc.)	SECRET
5. Who is installing and maintaining the equipment/software (FBI personnel, vendor, other)?	FBI PERSONNEL
6. Will the vendor require access to classified information/systems?	NO
<b>PROCUREMENT INFORMATION</b>	
Contracting Officer Name/ Phone:	
FBI COTR Name/Phone:	
Program Manager/Technical POC:	
Requisition Number:	
Purchase Order Number:	
Contract Number:	
<b>DOCUMENTATION ATTACHED</b>	
<input type="checkbox"/> Answers to the Acquisition Risk Questions (the replacement for the SF-328)	
<input type="checkbox"/> Key Management Personnel Listing (KMPL)	
<input checked="" type="checkbox"/> FD-369 Requisition for Supplies and/or Equipment	
<input type="checkbox"/> Statement of Work (SOW) – Required if a classified contract	
<b>PRIORITY</b>	
All requests will be handled by date received by ASU unless specific issues affecting the priority, i.e. Director's Priority, are specifically provided in writing by the Contracting Officer.	
Comments:	

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# Acquisition Security Unit Checklist

Version 3 - 10/01/2009  
Previous editions are obsolete and will not be accepted

2010-4532

MUST BE COMPLETED BY REQUESTOR	
Request Date:	04/15/2010
Anticipated Procurement Date:	
Requisition #:	
Point of Contact:	
POC Phone #:	
Highest Classification Required for Vendor to Provide Services / Products: (Access to FBI systems? Access to classified information?) <input type="checkbox"/> UNCLASSIFIED <input checked="" type="checkbox"/> SECRET <input type="checkbox"/> TOP SECRET <input type="checkbox"/> TOP SECRET/SCI	
Comments:	
ASU USE ONLY	
Date Received: 5/18/10	ASU POC:
Date Additional Information Requested: _____	<input type="checkbox"/>
Date Returned: _____	<input type="checkbox"/>
<input checked="" type="checkbox"/>	
<input type="checkbox"/> Classified Contract (DD 254 Required) <input type="checkbox"/> Community Acquisition Risk Section (CARS) Special Security Requirement (CARS Assessment Required) <input type="checkbox"/> Contracting Officer's Security Representative <input type="checkbox"/> E-QIP Special Security Requirements <input type="checkbox"/> DOJ Procurement Guidance for Security Systems and Data, including Personally Identifiable Information (PII) Special Security Requirements <input type="checkbox"/> DOJ Consent for Warrantless Searches of DOJ Workplaces <input type="checkbox"/> Personnel Security Special Security Requirements <input type="checkbox"/> Source Selection Evaluation Board (SSEB) Requirements for Classified Contracts Special Security Requirements <input type="checkbox"/> Contractor Financial Disclosure Requirements <input type="checkbox"/> Contractor Suitability Requirements <input type="checkbox"/> National Interest Determination	
ASU SPECIAL NOTES	
<input type="checkbox"/> Required if not already accomplished as part of the original contract award <input type="checkbox"/> Required if connected to a FISMA or Critical Asset System (i.e. _____) <input type="checkbox"/> Required if includes procurement of IT hardware / software connected to a FISMA or Critical Asset System <input type="checkbox"/> Intergovernmental procurement / reimbursement <input checked="" type="checkbox"/> No actions related to security were identified in the documentation provided	
ASU	5/18/10 Date
ACKNOWLEDGEMENT	
Procurement Official/COTR/Technical Representative: <input type="checkbox"/> I certify that those security requirements identified above by the ASU have been incorporated into the procurement documentation. <input type="checkbox"/> This <input type="checkbox"/> is / <input type="checkbox"/> is not a mission essential contract.	
Signature: _____ Printed Name: _____	J12 Date: APR-16-2010

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Please attach the completed checklist to your package at submission to Finance.

CREW-2314

~~UNCLASSIFIED~~

To: Finance From: Operational Technology  
Re: 319B-14-HQ-A1487504, 04/15/2010

LEAD(s):

Set Lead 1: (Info)

FINANCE

AT WASHINGTON, DC

Initiate sole source procurement action as requested in Requisition # [REDACTED] Contracting Officers are responsible for ensuring that CARC assessments are completed on all procurements of services involving access to classified information/space, and procurements for critical assets.

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CC: 1 - [REDACTED] QTERF (Encs.)  
1 - [REDACTED] QTERF (Encs.)  
1 - [REDACTED] QTERF (Encs.)

♦♦

~~UNCLASSIFIED~~

12-201 (Rev. 9-6-2006)

**FBI**

U.S. Department of Justice  
Federal Bureau of Investigation



**Purchase Order for Supplies or Services**

1. Date of Order 01/11/2010		2. Order No. [Redacted]		3. Mod. No.		4. Mod. Date		5. Page No. 1	
6. To Contractor (Name, Address and Zip Code): [Redacted]				7. Ship to (Consignee and address, Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27958A QUANTICO, VA 22135					
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6823, JEH F.B.I. BLDG. WASHINGTON, D. C. 20535				9. Send Invoice to: (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27958A QUANTICO, VA 22135					
10. Business Classification			11. F.O.B. Point DESTINATION			12. Discount Terms NET 30 DAYS			
13. Schedule									
Line No. (A)	Supplies or Services (B)			Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)		
[Redacted]									
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and Conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.						15. Grand Total XXXXXXXXXXXX See Instructions on Reverse			
Point of Contact - Purchase Order Information:					16. United States of America By (Signature)				
Point of Contact - Invoice Payment Status: Commercial Payments Unit [Redacted]					17. Name (Typed) XXXXXXXXXXXX Title: Contracting Officer				

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**C - PROCUREMENT**

CREW-2320

**FBI**

**U.S. Department of Justice  
Federal Bureau of Investigation**



**Purchase Order for Supplies or Services**

1. Date of Order 06/11/2010	2. Order No. [Redacted]	3. Mod. No.	4. Mod. Date	5. Page No. 2
6. To Contractor (Name, Address and Zip Code): [Redacted]		7. Ship to (Consignee and address, Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27958A QUANTICO, VA 22135		
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6025, 411 F.B.I. BLDG. WASHINGTON, D.C. 20535		9. Send Invoice to: (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 27958A QUANTICO, VA 22135		
10. Business Classification	11. F.O.B. Point DESTINATION	12. Discount Terms NET 30 DAYS		

## 13. Schedule

Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
	<p>THIS PURCHASE IS NEGOTIATED UNDER THE AUTHORITY OF:</p> <p>FILE # 100-255(C)(1)</p> <p>[Redacted]</p>				

## 14. Type of Order

☐ A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated.

☐ B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.

CONTRACT OR NUMBER

[Redacted]

15. Grand Total

See Instructions on Reverse

Point of Contact - Purchase Order Information:

[Redacted]

16. United States By (Signature)

17. Name

Title: Contracting Officer

**C - PROCUREMENT**

CREW-2321

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PS

PO INVOICE MATCHING INFORMATION

PMI

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 07/28/2011 08:09:39  
BROWSE: \_

=====

BUY ENTITY  
PO NO.  
PO LINE NO.  
BLANKET REL. NO.  
CURRENCY CODE  
PAYMENT BASIS

VENDOR:

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BASE PERMIT TO PAY      INVOICED TO DATE      PERMIT TO PAY

PO HEADER  
PO HEADER TAX/VAT  
PO HEADER ADDL COST  
BLANKET  
BLANKET TAX/VAT  
BLANKET ADDL COST  
PO LINE  
PO LINE TAX/VAT  
PO LINE ADDL COST

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ACH VENDOR/MISCELLANEOUS PAYMENT  
ENROLLMENT FORM

OMB No 1510-0056

This form is used for Automated Clearing House (ACH) payments with an addendum record that contains payment-related information processed through the Vendor Express Program. Recipients of these payments should bring this information to the attention of their financial institution when presenting this form for completion. See reverse for additional instructions.

PRIVACY ACT STATEMENT

The following information is provided to comply with the Privacy Act of 1974 (P.L. 93-579). All information collected on this form is required under the provisions of 31 U.S.C. 3322 and 31 CFR 210. This information will be used by the Treasury Department to transmit payment data, by electronic means to vendor's financial institution. Failure to provide the requested information may delay or prevent the receipt of payments through the Automated Clearing House Payment System.

AGENCY INFORMATION

FEDERAL PROGRAM AGENCY		
FBI		
AGENCY IDENTIFIER:	AGENCY LOCATION CODE (ALC):	ACH FORMAT:
N/A	15020001	<input checked="" type="checkbox"/> CCD <input type="checkbox"/> CTX
ADDRESS:		
935 PENNSYLVANIA AVENUE, N.W. ROOM 1993		
WASHINGTON, DC 20535		
CONTACT PERSON NAME:		TELEPHONE NUMBER:
COMMERCIAL PAYMENTS UNIT		
ADDITIONAL INFORMATION:		

PAYEE/COMPANY INFORMATION

NAME	SSN NO. OR TAXPAYER ID NO.
ADDRESS	
CONTACT PERSON NAME:	
	TELEPHONE NUMBER:

FINANCIAL INSTITUTION INFORMATION

NAME:		
ADDRESS:		
ACH COORDINATOR NAME:		
		TELEPHONE NUMBER:
NINE-DIGIT ROUTING TRANSIT NUMBER:		
DEPOSITOR ACCOUNT TITLE:		
DEPOSITOR ACCOUNT NUMBER:		LOCKBOX NUMBER:
TYPE OF ACCOUNT:		
<input checked="" type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> LOCKBOX		
SIGNATURE AND TITLE OF AUTHORIZED OFFICIAL:		TELEPHONE NUMBER:
(Could be the same as ACH Coordinator)		
Director of Treasury		

AUTHORIZED FOR LOCAL REPRODUCTION

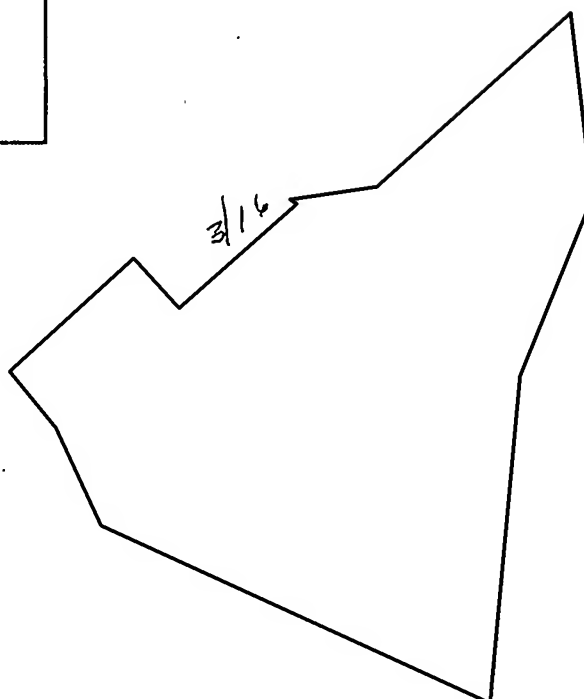
SP-5501 (Rev. 2-2003)  
Prescribed by Department of Treasury  
31 U.S.C. 3322; 31 CFR 210

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CREW-2327

Purchase Report	
Requisition #:	
ASAPU Acceptance Date:	2/18
ASAPU Assignment Date:	2/26
Unit Chief Assignment Date:	3/2
Contract Specialist:	
Requiring Division:	18
Item/Service:	
Purchase Order Information	
PO Number:	
PO Sign/Award Date:	
RDD/EDD	
Total Purchase Price	
Special Notes:	

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PS

VENDOR GENERAL INFORMATION

VGN

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

03/17/2010 15:56:43

REQUEST: g\_\_\_\_\_

PAY ENTITY :

SHORT NAME :

VENDOR NUMBER: \_\_\_\_\_ GROUP: \_\_\_\_\_

1:BUS TYPE - 2:WOMAN/SM.BUS

1: B 2: N 3: \_\_\_\_\_ 4: \_\_\_\_\_ 5: \_\_\_\_\_

DUNS NUMBER

D & B RATING DATE

D & B RATING

D & B APPRAISAL

SIC CODE

LABOR CONTRACT DATE

EST EXPENDITURE

TAX CERTIFICATION NBR:

EXPIRE DT: \_\_\_\_\_

CEC NUMBER

USER FIELD 1

COMMENT 1: \_\_\_\_\_

COMMENT 2: \_\_\_\_\_

COMMENT 3: \_\_\_\_\_

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12-201 (Rev. 9-6-2006)



U.S. Department of Justice  
Federal Bureau of Investigation



Purchase Order for Supplies or Services

1. Date of Order 04/17/2010		2. Order No. [REDACTED]		3. Mod. No.		4. Mod. Date		5. Page No. 1	
6. To-Contractor (Name, Address and Zip Code): [REDACTED]				7. Ship to (Consignee and address, Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 2775BA QUANTICO, VA 22135					
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 2023, 4TH F.B.I. BLDG WASHINGTON, D.C. 20535				9. Send Invoice to (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 2775BA QUANTICO, VA 22135					
10. Business Classification				11. F.O.B. Point DESTINATION				12. Discount Terms NET 30 DAYS	
13. Schedule									
Line No. (A)	Supplies or Services (B)			Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)		
[REDACTED]									
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.							15. Grand Total XXXXXXXXXX		
Point of Contact - Purchase Order Information:							16. United States of America By (Signature)		
Point of Contact - Invoice Payment Status: Commercial Payments Unit - [REDACTED]							17. Name (Typed) XXXXXXXXXXXX Title: Contracting Officer		

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C - PROCUREMENT

CREW-2331



**U.S. Department of Justice  
Federal Bureau of Investigation**



**Purchase Order for Supplies or Services**

1. Date of Order: 05/17/2010		2. Order No. [Redacted]		3. Mod. No.		4. Mod. Date		5. Page No.	
6. To Contractor (Name, Address and Zip Code): [Redacted]					7. Ship to (Consignee and address, Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 2700A QUANTICO, VA 22135				
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6423, JEFFERSON BLDG. WASHINGTON, D.C. 20535					9. Send Invoice to (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 2700A QUANTICO, VA 22135				
10. Business Classification			11. F.O.B. Points DESTINATION			12. Discount Terms NET 30 DAYS			
13. Schedule									
Line No. (A)	Supplies or Services (B)				Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)	
	<p>A PROPER INVOICE SUBMITTED FOR PAYMENT TO THE FBI MUST CONTAIN THE FOLLOWING: THE NAME OF THE VENDOR; AN INVOICE NUMBER; THE CONTRACT OR PURCHASE ORDER NUMBER; THE INVOICE DATE; DESCRIPTION (I.E. NAME OR ITEM LINE NUMBER); PRICE AND QUANTITY OF GOODS OR SERVICES RENDERED; SHIPPING AND/OR PAYMENT TERMS; TAXPAYER ID#; HAZARDING &amp; ROUTING NUMBER TO ALLOW EFT PAYMENT; CONTACT NAME, TITLE AND TELEPHONE NUMBER AND ANY OTHER SUBSTANTIATING DOCUMENTATION AS REQUIRED BY THE CONTRACT.</p> <p>THIS PURCHASE IS NEGOTIATED UNDER THE AUTHORITY OF TITLE 41, USC 253(c)(1).</p> <p>*****FEDERAL BUREAU OF INVESTIGATION*****</p> <p>[Redacted]</p>								
14. Type of Order						15. Grand Total			
<input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation, number if indicated, and the attached sheets, if any, including delivery as indicated.						<input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.			
CONTRACTOR NUMBER [Redacted]						See Instructions on Reverse [Redacted]			
Point of Contact - Purchase Order Information:						16. United States of America By (Signature)			
[Redacted]						17. Name (Type) Title: Contract Officer [Redacted]			

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**C - PROCUREMENT**

CREW-2332

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REQUISITION HEADER

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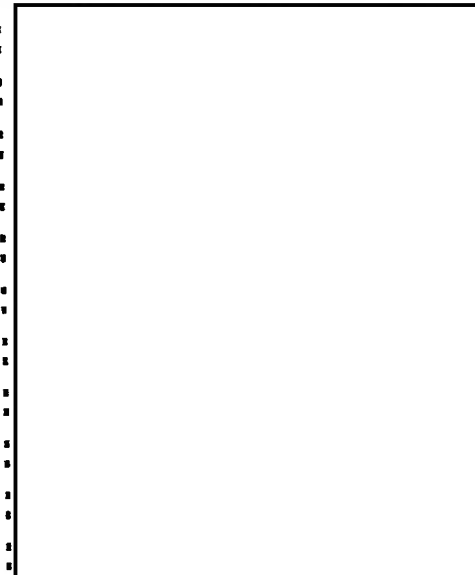
NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

03/02/2010 11:40:08

REQUEST: g\_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

=====

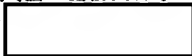

BUY ENTITY	:	
REQUISITION NO.	:	
REQUESTER ID	:	
REQUISITION TOTAL	:	
REQUISITION LINE TOTAL	:	
DIFFERENCE	:	
BUYER ID	:	
REQUISITION STATUS	:	
GL EFFECTIVE DATE	:	
DATE ENTERED	:	
DATE LAST UPDATED	:	
SIGNATURE APPROVAL	:	
UNRESOLVED LINES	:	0
OPEN LINES	:	1
PARTIALLY CLOSED LINES:	:	0
CLOSED LINES	:	0
TOTAL LINES	:	1



RECEIVED  
MAR 2 2010

BY: 

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NOTES: ENTERED 2/12/10 BY  SENT TO ASAPU.   
<ASAPU RECD 2/18, FRWD TO QCU 2/26>RCVD QCU 3/2

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REQUISITION HEADER

RQH

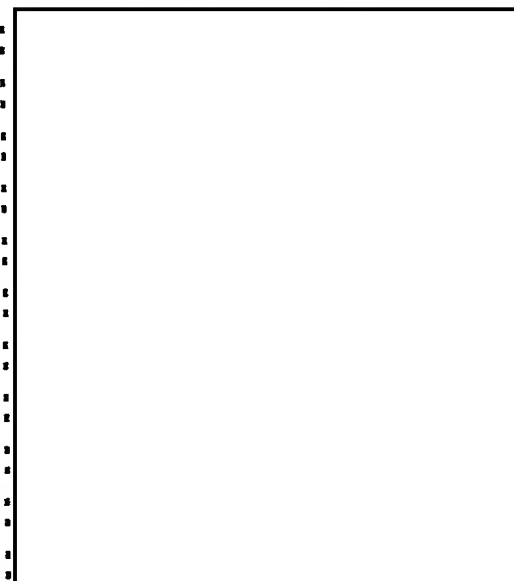
NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_

02/26/2010 07:25:21

REQUEST: G\_\_\_\_\_ SAVE SHOW PAGE NO: \_\_\_\_\_

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BUY ENTITY	:	
REQUISITION NO.	:	
REQUESTER ID	:	
REQUISITION TOTAL	:	
REQUISITION LINE TOTAL	:	
DIFFERENCE	:	
BUYER ID	:	
REQUISITION STATUS	:	
GL EFFECTIVE DATE	:	
DATE ENTERED	:	
DATE LAST UPDATED	:	
SIGNATURE APPROVAL	:	
UNRESOLVED LINES	:	0
OPEN LINES	:	1
PARTIALLY CLOSED LINES	:	0
CLOSED LINES	:	0
TOTAL LINES	:	1



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NOTES: ENTERED 2/12/10 BY   SENT TO ASAPU.    
<ASAPU RECD 2/18, FRWD TO QCU 2/26>

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CREW-2344

TRU  
Unit

☒ ROUTINE      ☐ PRIORITY      ☐ EXPEDITE

SRU ROUTING SLIP

<input checked="" type="checkbox"/> FY10	<input type="checkbox"/> FY09-10	<input type="checkbox"/> FY2010-R	<input type="checkbox"/> NY	<input type="checkbox"/>
--	----------------------------------	-----------------------------------	-----------------------------	--------------------------

*Funds Approval*

11/27/10

- ☐ TRIAD
- ☐ PURCHASE CARD
- ☐ REIMBURSABLE

*Final Review*

*Commit/Copy/File*

11/27/10

*Send to:*

☐ Investment Management Unit, 616 H. St. NW, Suite 703, Gallery Place) IT Acquisitions

☒ Acquisition Strategy and Planning Unit (EBHQ-Rm: 6863)

**PLEASE SEND TO INDIVIDUAL MARKED BELOW WHEN FINISHED**

☐

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Rev 11-14-09	REQUISITION (FD-369) COVER SHEET	REQUISITION #
<input checked="" type="checkbox"/> Required	OPERATIONAL TECHNOLOGY DIVISION (OTD)	Entered in PAMS by
<input type="checkbox"/> Priority		
<input type="checkbox"/> Expediting		

REQUIRED 1. ☒ **REQUIRED DOCUMENTATION** (See Acquisition Documentation Guideline)

<input type="checkbox"/>	Acquisition Plan FD-911 (Required for acquisitions $\geq$ \$5M system life cost)
<input type="checkbox"/>	EC (Required for all acquisitions $\geq$ \$100K, except contract renewals)
<input type="checkbox"/>	Independent Government Cost Estimate
<input checked="" type="checkbox"/>	Market Research
<input checked="" type="checkbox"/>	Sole Source Justification
<input checked="" type="checkbox"/>	Statement of Work (SOW) or Statement of Need (SON)
<input type="checkbox"/>	Source Selection Plan (Required for competitive acquisitions $\geq$ \$100K)
<input checked="" type="checkbox"/>	Acquisition Security Checklist
<input checked="" type="checkbox"/>	Acquisition Security Request (ASR)
<input type="checkbox"/>	DD Form 254 (Required for classified contracts)
<input type="checkbox"/>	Section 508 (Required for electronic and IT acquisitions)

Additional Requirements for IT Acquisitions Only

<input type="checkbox"/>	COTS Approval (Required for IT non-baseline acquisitions)
<input type="checkbox"/>	IT Acquisition Form (Required for requisitions $>$ \$25K)

REQUIRED 2. ☒ **UNIT CHIEF APPROVAL**

UC   initial  
Printed Name

3. ☒ **TMSU APPROVAL**

01-26-10 P06:16 OUT

initial 1/26/10  
Printed Name

TMSU Review Criteria		YES	NO
(If the Answer to any of below questions is YES, Requisition MUST be submitted to TMSU)			
Is the request $\geq$ \$5M (TMSU will assist in preparing for Acquisition Review Board)?			x
Is request to fund a Service Contract (New Contract <input checked="" type="checkbox"/> )		x	
If funding an existing contract option or mod identify the Contract # <input type="text"/>			
Is request to fund an Activity or Project (New <input type="text"/> or Existing <input type="text"/> )?			
If an existing Activity or Project reported in PAMS, identify PAMS ID # <input type="text"/>			x

4. ☐  **$>$  \$100,000 - Section Chief**   initial  
Printed Name

5. ☐  **$>$  \$250,000 - Deputy Assistant Director** Patrick B. Cook  initial

6. ☐  **$>$  \$1,000,000 - Assistant Director** Marcus C. Thomas  initial

7. ☐ **REQUISITION WITH ECs ATTACHED:**  
 for uploading or alternate   initial  
Printed Name

REQUIRED 8. ☒ **SRU - FUNDING APPROVAL & TRANSMITTAL to CONTRACTING**

DTP: All Accounts <input type="text"/> <input type="text"/> initial	TFS&S: Equipment, Supplies <input type="text"/> <input type="text"/> initial
Cyber, 3G, TRIAD <input type="text"/> <input type="text"/> initial	TFS&S: Services, Training <input type="text"/> <input type="text"/> initial
	x <input type="text"/> <input type="text"/>

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CREW-2347

# Acquisition Security Unit Checklist

Version 3 - 10/01/2009  
Previous editions are obsolete and will not be accepted

2010-1964

MUST BE COMPLETED BY REQUESTOR	
Request Date:	JAN - 5 - 2010
Anticipated Procurement Date:	FEB - 5 - 2010
Requisition #:	
Point of Contact:	
POC Phone #:	
Highest Classification Required for Vendor to Provide Services / Products: (Access to FBI systems? Access to classified information?) <input checked="" type="checkbox"/> UNCLASSIFIED <input type="checkbox"/> SECRET <input type="checkbox"/> TOP SECRET <input type="checkbox"/> TOP SECRET/SCI	
Comments:	
ASU USE ONLY	
Date Received: 2/25/10	ASU POC:
Date Additional Information Requested: _____	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Date Returned: _____	
<input type="checkbox"/> Classified Contract (DD 254 Required) <input type="checkbox"/> Community Acquisition Risk Section (CARS) Special Security Requirement (CARS Assessment Required) <input type="checkbox"/> Contracting Officer's Security Representative <input checked="" type="checkbox"/> E-QIP Special Security Requirements <input type="checkbox"/> DOJ Procurement Guidance for Security Systems and Data, including Personally Identifiable Information (PII) Special Security Requirements <input type="checkbox"/> DOJ Consent for Warrantless Searches of DOJ Workplaces <input type="checkbox"/> Personnel Security Special Security Requirements <input type="checkbox"/> Source Selection Evaluation Board (SSEB) Requirements for Classified Contracts Special Security Requirements <input type="checkbox"/> Contractor Financial Disclosure Requirements <input type="checkbox"/> Contractor Suitability Requirements <input type="checkbox"/> National Interest Determination	
ASU SPECIAL NOTES	
<input checked="" type="checkbox"/> Required if not already accomplished as part of the original contract award <input type="checkbox"/> Required if connected to a FISMA or Critical Asset System (i.e. _____) <input type="checkbox"/> Required if includes procurement of IT hardware / software connected to a FISMA or Critical Asset System <input type="checkbox"/> Intergovernmental procurement / reimbursement <input checked="" type="checkbox"/> No actions related to security were identified in the documentation provided <input type="checkbox"/>	
ASU _____ Date _____	
ACKNOWLEDGEMENT	
Procurement Official/COTR/Technical Representative: <input checked="" type="checkbox"/> I certify that those security requirements identified above by the ASU have been incorporated into the procurement of _____ <input checked="" type="checkbox"/> This is / is not a _____ al contract. Signature: _____ Date: 07 Jan 2010 Printed Name: _____	

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Please attach the completed checklist to your package at submission to Finance.

CREW-2350



### ACQUISITION SECURITY REQUEST

Request Date: 11/3/10	Anticipated Procurement Date: 11/30/10
<b>VENDOR INFORMATION</b>	
<input type="checkbox"/> Reseller With Access to FBI Facilities <input type="checkbox"/> Reseller With <u>No</u> Access to FBI Facilities	
Vendor Name:	
Vendor Address:	
<input checked="" type="checkbox"/> Manufacturer <input type="checkbox"/> Hardware <input type="checkbox"/> Software <input checked="" type="checkbox"/> Maintenance	
Vendor Name:	
Vendor Address:	
<input type="checkbox"/> Contractor Providing Classified Services <input type="checkbox"/> DD Form 254 Required	
Vendor Name:	
Vendor Address:	
<b>PRODUCT/SERVICES INFORMATION</b>	
<input type="checkbox"/> FISMA System <input type="checkbox"/> Critical Asset System <input type="checkbox"/> Telecommunications <input type="checkbox"/> Audiovisual	
1. Products being procured (list the specific hardware / software / services in detail)	
2. What entity will be purchasing and using the product (Location, Division, Section, Unit, and Program)?	Operational Technology Division Traditional Technology Section/Technical Response Unit (TRU) ERF Building 27958A Quantico, VA 22135  Unmanned Aerial Vehicle/System program
3. Network on which product/service is to be used (i.e. [redacted] etc.)	N/A
4. Highest Classification / Security Requirements (i.e. Top Secret, Top Secret SCI, Secret, SBU, LES, etc.)	UNCLAS/LES
5. Who is installing and maintaining the equipment/software (FBI personnel, vendor, other)?	FBI personnel assigned to TRU maintain and operate TRU. These personnel will administer the Service/Maintenance Agreement on an as needed basis during the term of the Agreement.
6. Will the vendor require access to classified information/systems?	N/A
<b>PROCUREMENT INFORMATION</b>	
Contracting Officer Name/ Phone:	
FBI COTR Name/Phone:	
Program Manager/Technical POC:	
Requisition Number:	
Purchase Order Number:	
Contract Number:	
<b>DOCUMENTATION ATTACHED</b>	
<input type="checkbox"/> Answers to the Acquisition Risk Questions (the replacement for the SF-328)	
<input type="checkbox"/> Key Management Personnel Listing (KMPL)	
<input type="checkbox"/> FD-369 Requisition for Supplies and/or Equipment	
<input type="checkbox"/> Statement of Work (SOW) – Required if a classified contract	
<b>PRIORITY</b>	

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## ACQUISITION SECURITY REQUEST

All requests will be handled by date received by ASU unless specific issues affecting the priority, i.e. Director's Priority, are specifically provided in writing by the Contracting Officer.

Comments:



Purchase Order for Supplies or Services						
1. Date of Order 05/17/2010		2. Order No. [Redacted]		3. Mod. No.		4. Mod. Date
5. Page No. 1		6. To Contractor (Name, Address and Zip Code) [Redacted]		7. Ship to (Consignee and address, Zip Code) FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 2795BA QUANTICO, VA 22135		
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6025, JEH F.B.I. BLDG. WASHINGTON, D. C. 20535				9. Send Invoice to: (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 2795BA QUANTICO, VA 22135		
10. Business Classification		11. F.O.B. Point DESTINATION		12. Discount Terms NET 30 DAYS		
13. Schedule						
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)	
[Redacted Table Content]						
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.				15. Grand Total XXXXXXXXXXXX See Instructions on Reverse		
16. United States of America By (Signature)				17. Name (Typed) XXXXXXXXXXXX Title: Contracting Officer		
18. Point of Contact - Purchase Order Information:  Point of Contact - Invoice Payment Status: Federal Payments Unit [Redacted]						

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C - PROCUREMENT

CREW-2356



U.S. Department of Justice  
Federal Bureau of Investigation



Purchase Order for Supplies or Services					
1. Date of Order 03/17/2010		2. Order No. [Redacted]		3. Mod. No.	
4. Mod. Date		5. Page No.		6. To Contractor (Name, Address and Zip Code): [Redacted]	
7. Ship to (Consignee and address, Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 2795BA QUANTICO, VA 22135		8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 4000, JCH F.B.I. BLDG. WASHINGTON, D. C. 20535		9. Send Invoice to: (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [Redacted] BUILDING 2795BA QUANTICO, VA 22135	
10. Business Classification		11. F.O.B. Point DESTINATION		12. Discount Terms NET 30 DAYS	
13. Schedule					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
	<p>A PROPER INVOICE SUBMITTED FOR PAYMENT TO THE FBI MUST CONTAIN THE FOLLOWING: THE NAME OF THE VENDOR; AN INVOICE NUMBER; THE CONTRACT OR PURCHASE ORDER NUMBER; THE INVOICE DATE; DESCRIPTION (I.E. NAME OR ITEM LINE NUMBER); PRICE AND QUANTITY OF GOODS OR SERVICES RENDERED; SHIPPING AND/OR PAYMENT TERMS; TAXPAYER IDN; MARKING / ROUTING NUMBER TO ALLOW FBI PAYMENT; CONTACT NAME, TITLE AND TELEPHONE NUMBER AND ANY OTHER SUBSTANTIATING DOCUMENTATION AS REQUIRED BY THE CONTRACT.</p> <p>THIS PURCHASE IS NEGOTIATED UNDER THE AUTHORITY OF: FLE 41 USC 355(C)(1)</p> <p>[Redacted]</p>	6/30/11			
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and Conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. <input type="checkbox"/> B. Delivery - This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.					
15. Grand Total [Redacted]					
See Instructions on Reverse					
16. United States of America By (Signature) [Redacted]					
17. Name (Title) [Redacted] Title: Contract					

**SIMPLIFIED ACQUISITION PROCEDURES CHECKLIST  
UP TO AND INCLUDING \$100,000**

Contractor:   
Address:   
Point of Contact:   
COTR/TM/POC \*:   
Phone #:

Date of Award: 08/01/2011  
Amount of Award:   
Contract Type:   
Program Manager Approval:  
☒ Yes ☐ Not Required

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**A. DOCUMENTS**

☒ Purchase Request (FD-369)  
☒ Purchase Order  
☐ FPDS Screen  
☒ CCR Profile  
☒ Excluded Parties List (EPLS)  
☐ Statement of Work\*  
☐ Oral Quotes  
☒ Written Quotes  
☐ APP # \*  
☐ Waivers \*  
☐ IT Acquisition Approval \*  
☐ Green Purchasing Exception Waiver\*  
☐ Bidder's List Checked  
☐ D&F for FedBid\*  
Davis-Bacon Applicable ☐ Yes ☐ No  
Service Contract Act ☐ Yes ☐ No

**B. PROCUREMENT PROCEDURES**

**Up to and including \$25,000**

Maximum Competition ☐ Yes ☒ No  
Small Business Set-Aside ☐ Yes ☒ No  
(If "NO", documentation must be in file)  
RFQ Posted\* ☐ Yes ☒ No  
☐ Small Business Offering Large Business Product

**Up to and including \$100,000**

Maximum Competition ☐ Yes ☒ No  
Small Business Set-Aside ☐ Yes ☒ No  
(If "NO", documentation must be in file)  
RFQ Posted\* ☐ Yes ☒ No  
☐ Small Business Offering Large Business Product  
Publicized in FedBizOpps ☐ Yes ☒ No  
(If "NO", J & A must be in file)  
Combined Solicitation\* ☐ Yes ☒ No  
Announced via Internet\* ☐ Yes ☒ No

**C. OPTION INFORMATION\***

Type of Option:  
☒ Period of Performance ☐ Quantity  
No. option years beyond base \_\_\_\_\_ OR  
Additional Quantity \_\_\_\_\_  
Notice of ☐ 30 ☐ 60 ☐ other days to renew

**D. BASIS FOR AWARD (CHECK ONE)**

☐ Best Value (file includes specifics)  
☐ Brand Name  
☐ Brand Name or Equal  
☐ Lowest Price/Technically Acceptable  
☐ Urgent  
☐ Ratification (Section Chief Approval)  
☒ Only One Source (Sole Source Form)

**KEY**  
**BOLD** = Required  
\* = If applicable

Updated 12/1/2008

CREW-2395

PS

PO INVOICE MATCHING INFORMATION

PMI

NEXT FUNCTION: \_\_\_\_\_ ACTION: \_\_\_\_\_ HISTORY: \_ 03/13/2013 07:44:03  
BROWSE: b

=====

BUY ENTITY  
PO NO.  
PO LINE NO.  
BLANKET REL. NO.  
CURRENCY CODE  
PAYMENT BASIS

VENDOR:

BASE PERMIT TO PAY    INVOICED TO DATE    PERMIT TO PAY

PO HEADER  
PO HEADER TAX/VAT  
PO HEADER ADDL COST  
BLANKET  
BLANKET TAX/VAT  
BLANKET ADDL COST  
PO LINE  
PO LINE TAX/VAT  
PO LINE ADDL COST

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12-201 (Rev 9-6-2006)

**FBI**

U.S. Department of Justice  
Federal Bureau of Investigation



Purchase Order for Supplies or Services					
1. Date of Order 08/01/2011	2. Order No. [REDACTED]	3. Mod. No.	4. Mod. Date	5. Page No. 1	
6. To Contractor (Name, Address and Zip Code): [REDACTED]		7. Ship to (Consignee and address, Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 27958A QUANTICO, VA 22135			
8. Issuing Office (Address correspondence to): FEDERAL BUREAU OF INVESTIGATION PROCUREMENT SECTION ROOM 6823, JEH F.B.I. BLDG. WASHINGTON, DC 20535		9. Send Invoice to: (Name, Address and Zip Code): FEDERAL BUREAU OF INVESTIGATION ATTN: [REDACTED] BUILDING 27958A QUANTICO, VA 22135			
10. Business Classification		11. F.O.B. Point DESTINATION		12. Discount Terms NET 30 DAYS	
13. Schedule					
Line No. (A)	Supplies or Services (B)	Quantity Ordered (C)	Unit (D)	Unit Price (E)	Amount (F)
	ALL ITEMS SHALL BE PROVIDED IN ACCORDANCE WITH THE TERMS AND CONDITIONS ATTACHED TO THIS ORDER. DIRECT ALL SHIPMENTS TO ATTN.: SUPPLY TECH AT THE ADDRESS IN BLOCK 7. DIRECT ALL INVOICES TO ATTN.: [REDACTED] AT THE ADDRESS IN BLOCK 9.				
[REDACTED]					
14. Type of Order <input type="checkbox"/> A. Purchase - Please furnish the following under the terms, and Conditions specified on both sides of this order, the above quotation number if indicated, and the attached sheets, if any, including delivery as indicated. CONTRACTOR NUMBER [REDACTED]			15. Grand Total [REDACTED] See Instructions on Reverse		
Point of Contact - Purchase Order Information: [REDACTED]			16. United States of America [REDACTED] Title: Contracting Officer		

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B - BUYER

CREW-2403